AC 44892

1. ~~Mr Muston~~ ~~B.415~~
2. ~~Mr Morley Parry~~ A.421
3. ~~Mr Perry~~ ~~A.405~~

REPORT

ON THE

LOCAL HEALTH

AND

WELFARE SERVICES

OF THE

COUNTY BOROUGH

OF

WALLASEY

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1968

COUNTY BOROUGH OF WALLASEY

ANNUAL REPORT

of the

Medical Officer of Health

and

Principal School Medical Officer

FOR THE YEAR

1968

HOWARD W. HALL, M.B., Ch.B., D.P.H,
Medical Officer of Health,
Principal School Medical Officer, etc.

Including the Report of the
CHIEF PUBLIC HEALTH INSPECTOR
(A. RIDGWAY, M.A.P.H.I.).

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Public Health Department,
Town Hall,
WALLASEY.

To: The Mayor, Aldermen and Councillors of the County Borough of Wallasey:

I have pleasure in presenting to you the Annual Report on the Health, Welfare and School Health Services of the borough for the year 1968.

In February, the whole of the Health and Welfare Department and the Children's Section of the Town Clerk's Department moved into the new offices in the South Annexe of the Town Hall. The staff are grateful to the Council for providing comfortable modern offices, which comply with the Shops, Offices and Railway Premises Act. The accommodation of all the personal health and personal social services under one roof has facilitated liaison between the departments.

In December, the Worshipful the Mayor, Alderman G.R. Holmes opened Wallasey's eighth welfare hostel "Granville House" in Wallasey Village which gave the welfare services a much needed additional forty beds.

The year was a notable one for reports. The "Seebohm Report and the first "Green Paper" on the administrative structure of the medical and related services in England and Wales were published in midsummer. Both these reports gave rise to much discussion not only within the local authority services but also more widely within the hospital and general medical services. No doubt the pattern of the services for the 1970's will emerge when the awaited report of the Royal Commission on Local Government is published in 1969.

Vital Statistics.

The year was a good one with a new low infant mortality rate of 16.47 compared with a rate of 26.66 in 1967 and this compares favourably with the England and Wales rate of 18.0 for 1968.

Less favourable trends were the increase in the number of illegitimate live births - 185 (100 male 85 female) recorded by the Registrar General as belonging to the borough, compared with 175 in 1967 and the increase in the incidence of venereal disease (page 58). Are these figures a reflection of the modern permissive society? I will leave the reader to decide.

Coronary thrombosis and cancer in its various forms were the principal causes of death in the Borough. A table on page 9 shows the causes of death in the borough for 1968. The total deaths for the year was 1,284 (628 males and 658 females) compared with 1,308 for 1967 (629 males and 679 females) giving a death rate of 12.59 compared with 12.77 for 1967.

It is hoped that all cigarette smokers who read this report will note the graph on page 8 showing the deaths from cancer of the lung and seriously consider giving up their addiction.

Infectious Diseases.

There was no serious outbreak of infectious disease in the town. The influenza from the Far East which was forecast did not really materialise, but there were four deaths from influenza in the town and 98 from pneumonia, slightly more than the previous year.

Measles vaccination was offered for the first time. Only 340 children received the vaccine. This was due to the fact that measles was prevalent in the town at the time the vaccine was introduced.

Health Centres

Officers of the local authority, in company with the Clerk of the Wallasey Executive Council and a general practitioner, formerly Chairman of the Executive Council, visited the Ministry of Health in July to discuss preliminary plans for the setting up of a Health Centre at the north end of the borough. Subsequently, a formal application was received from the Executive Council to provide a Health Centre for 10 - 12 doctors. This was supported by the Health Committee, but unfortunately the Council decided to defer the project in view of the financial restrictions.

Domiciliary Midwifery Service.

Only 74 cases were delivered on the district, a further decline in the numbers, 102 being the corresponding figure for 1967. 1,209 mothers, who were delivered in hospital, but discharged before the tenth day, were attended by the staff.

Health Visiting.

An account of the work of the health visitors is given on page 38 Further slow but steady advances were made in attachment schemes, including the Wallasey Village group practice. The health visitors are taking an increasing

share in the work of surveillance of old people in their own homes in full collaboration with the general practitioner in charge.

Health education, care of mothers and young children, with particular regard to families with problems, cervical cytology and family planning, together with the School Health Service duties makes the health visitor/school nurse one of the most indispensable members of the health department team of domiciliary workers. It is much to be regretted that we were unable to obtain a full staff for much of the year.

District Nursing Service.

The Superintendent's account of the work of the nurses can be found on page 41. An interesting new feature, of which one hopes to see more in the future, is the attachment of a nurse to the new group practice in Wallasey Village.

Domestic Help Service

This service was busy throughout the year 126,902 hours were worked 115,575 of these were allocated to elderly people in the borough. This is a very valuable service especially for helping old people living alone. It still needs strengthening when finances become available.

It is pleasing to note the help given to the service by students during their summer vacation, and also, through the liaison with the Wallasey Council of Social Service, the helpful activities of an organised group of young volunteers. How different this is from the vandalism which is all too prevalent in parts of the town.

Mental Health Services

A special effort was made with considerable success to reduce the number of people admitted to hospital on a compulsory basis and thus carry out the spirit of the 1959 Mental Health Act. Only 13 cases were removed under Section 29 compared with 37 admissions under this section in 1967.

Most of the mental welfare officers are dual purpose officers and have duties to perform under the National Assistance Act as well as the Mental Health Act. This has worked well in the past, but with the modern case work approach it is felt that they have insufficient time to go into their cases in any depth nor to provide the background social history, which is so desirable before the consultant psychiatrist sees the case. At the time of writing this foreword to the Annual Report, the whole structure of the Welfare Department and the Mental Welfare Section is under review by the Establishment Officer.

Environmental Health

There is no need for me to make many observations on this side of the work as it is fully reported in the Chief Public Health Inspector's section. Steady progress continued in our Clean Air programme and good results are being achieved under the Shops, Offices and Railway Premises Act, 1963. Slum clearance has slowed but this is not a very big problem in Wallasey. Greater efforts in future will have to be made to prevent houses becoming unfit for human habitation.

Noise abatement again took up a fair proportion of the inspectorate's time.

Food hygiene also received its share of the inspectors' time but more could have been done if we had had a full complement of staff.

Welfare Services

As has already been mentioned the main event of the year was the opening of the eighth welfare hostel "Granville House" in Wallasey Village by his Worship the Mayor, Alderman G.R. Holmes.

There appears to be no lack of future residents for the Wallasey hostels judging by the number of old people living alone in their declining years in the borough.

Much more can be done for these people to put off the day when they will require admission to a hostel. More Meals on Wheels, sheltered housing, more home helps and more voluntary workers to assist in delivering meals-on-wheels or to help in the work of the Old People's Voluntary Welfare Committee or the Voluntary Blind Welfare Committee. Much emphasis is placed on the part that the voluntary worker can play in the future social services as envisaged in the "Seebohm" committee report.

I should like to thank those ladies and gentlemen and also the young people in the borough who are already taking part in these voluntary tasks.

Conclusion

In conclusion I should like to thank the Chairman and Members of the Health, General Health and Welfare Committees for their continued interest and support throughout the year. A special thank you to my staff, who have given me their loyal support in a difficult year with shortage of funds, shortage of staff and two reports, which have given many much doubt as to their future.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

HOWARD W. HALL.

PUBLIC HEALTH OFFICERS of the AUTHORITY

As at 31st December, 1968.

Medical Officer of Health and Principal School Medical Officer: HOWARD W.HALL. M.B., Ch.B., D.P.H., F.R.S.H. Town Hall, Wallasey. Telephone No. 7070.

Deputy Medical Officer of Health and Deputy Principal School Medical Officer:

WILLIAM F. CHRISTIAN. M.B. Ch.B., D.P.H.

Medical Officer in Department and School Medical Officer: SHEILA BELL, M.B., Ch.B.,

Principal Dental Officer:
W.J.MEAKIN, L.D.S., R.C.S.

Dental Officers:
W.A.HENDERSON, L.D.S.
E.G. MASON, L.D.S.

Chief Public Health Inspector:
A. RIDGWAY, M.A.P.H.I.

Deputy Chief Public Health Inspector:
G. SHAW.

Senior Public Health Inspectors:
J.Q. CALLISTER, Housing.
W. GLADDEN, Smoke Control.
R.HUGHES, Offices, Shops and Railway Premises Act.
G.CARR, Milk,Dairies,Meat and Diseases of Animals Act.

District Public Health Inspectors:

K.J. WARBRICK
C.V.TAYLOR
R. JONES
G.K.GREAVES

Superintendent Health Visitor/School Nurse:
Mrs. K.SCHOFIELD, S.R.N., H.V. Cert., N.N.E.B.

Health Visitors/School Nurses

Mrs. W.DOVEY	Miss E.M. MORGAN
Miss M.E.ASPINALL	Miss E. WHITBURN
Miss K.E.HIGGINS	Miss P. REYNOLDS
Miss M.HUGHES	Miss J. LITTLEMORE
Miss W.LACY	Mrs. M.J. GRIFFITHS
Mrs. E.E.BROWN (Part-Time)	Mrs. E.P. NOLAN (Part-Time)

School Nurses	Tuberculosis Visitors
Mrs. P.I.WILSON	Mrs. L.M. JONES
Mrs. A.P.MENET (Part-Time)	Mrs. B. MINISTER (Part-Time)

Municipal Midwives:

Mrs. E.E.HINTON	Mrs. P. SHACKLADY
Miss E.WOODS	Miss I.K. PAISLEY
Mrs.M.E.GALLIMORE	Mrs. J.M. NORRIS

Chief Weights and Measures and Food and Drugs Inspector:
J.A.W. PRICE, Cert. Board of Trade.
Senior Weights and Measures and Food and Drugs Inspector: C.HARWOOD D.P.A., Cert. Board of Trade.

Public Analyst (Part-Time):
TENNYSON HARRIS

Health Education Officer (Part-Time):
DR. J. FERGUSSON, L.M.S.S.A., M.I.H.E., M.R.S.H., F.R.S.A.

Chief Administrative Assistant:
G.A. LOXHAM, D.P.A.

Administrative Assistant:
J. M. GIBSON

Clerical Staff:

D. FARQUHAR (Senior Clerk)	Mrs. J. O'NEILL
W.R. KIDD	Mrs. D. JACKSON
J.R. KELLY	Mrs. E.M. NEWMAN
R.D. JONES	Mrs. B. WARD
Miss G. BOOTH	Miss D.W. SIMPSON
Miss M.BLENCOWE	Mrs. A.E. JONES
Miss B.M.HERRIOT	Miss S. HARDING
Miss E. MASTERS	Mrs. L.A. SMITH
Mrs. G. DODD	Miss S. VERNON
	Miss P. RICHARDS
	Miss H.E.L. PEARSON

Matrons of Day Nurseries:

Miss F.E. CHALLONER, Central Park Day Nursery.
Miss B.B. RIMMER, Oakdale Day Nursery.
Miss P. WARNER, Eastway Day Nursery.

Superintendent District Nursing Service:
Mrs. K. ELSON, S.R.N., N.D.N. Cert. (Queens Nurse).

District Nurses:

Miss B. JOY (Senior Nurse)
Miss M. GOVIER (Part/time)
Miss B. HUNTINGTON
Miss D.E.MURPHY(P/Time)
Mrs. D.CROFT
Mrs. D.EVANS
Mrs. S.BATEMAN
Mrs. G.P.McGROUTHER
Mrs. S.H.DAVIES
Mrs. S.C.McMAHON
Miss D.DEAKIN
Mrs. S.E. POUSTIE
Mrs. I.A. MATTHEWS
Mrs. E.G.JOHNSON
Mrs. E.C.SINCLAIR(P/Time)
Miss P. SINNOTT
Mrs. M. BAXTER
Mrs.M.PEMBERTON(P/Time)
Mrs.M.P. TRAVIS (Enrolled Nurse)
Mrs. J.A.SCHROEDER
Mrs. M.E. BALSHAW
Mrs. D.M. WOOLEY

Bath Attendants:
Mrs. D. SARNEY
Mrs. E. HETHERINGTON
Mrs. M.P. FLEMING

Domestic Help Organiser:
Miss A. ELCOCK

Assistant Domestic Help Organiser:
Mrs. M.E.ROBERTS

Chief Training Officer, Adult Training Centre:
F. DAVIES

Supervisor, Junior Training Centre:
Miss I.P.D. MACDONALD.

Senior Mental Welfare Officer:
G. NOON.

Mental Welfare Officers:

A.E. MAIRS
Miss M.V. PHILLIPS
J.L. HARRISON
D. EVANS
A.S. TRUFFET
D.C. YOUNG

Chapel Hey Residential Mental Health Hostel,

Superintendent J.D. EDWARDS, S.R.N., R.M.N.

Assistant Superintendent Mrs. J.W. EDWARDS, R.M.N.

Assistant Matrons
Mrs. V.C. HINTON.
Mrs. R.M. ROBINSON.

WELFARE SERVICES

Senior Welfare Officer:
D. G. WHARTON

Welfare Officers:
A. S. TRUFFET
D. EVANS
A. E. MAIRS
J. L. HARRISON
D. W. C. YOUNG

Welfare Officer (Rehabilitation):
Mrs. M.C. ROE
Welfare Assistant (Rehabilitation):
Mrs. B.V. ROSS
Welfare Officer (Handicapped Persons):
Miss M.SHENNAN
Social Welfare Officer with Admin.Duties:
Mr. E. KEEN
Welfare Assistant (Handicapped Persons);
Mrs. P.M.RAEBURN

Welfare Trainee
Miss L.I. SHARP

Handicrafts Teacher (Handicapped Persons):
Mrs.C.W.GRIFFITH
Mr. F.J.CORKILL

Home Teachers of the Blind:
Miss I. BAILLIE
Mrs. E.E.CLAYTON
L. SMITH
Mrs. M.DOWLING

Clerical Staff:
A.C. HINTON
Mrs. D.WOODCOCK
Miss J.M.GITTINS
N.F. HARVEY
M.N. LANCEFIELD

Matrons of Hostels for the Aged:
Miss M. ROBERTS "Fernleigh".
Miss E. PARSONS "Lamorna".
Miss H. VOWLES "Redcliffe".
Mrs. A.L. GRIMES "Newholme".
Mrs. W.M.FITZGERALD "Seacombe House".
Mrs. P.A.STANTON "Granville House".
Mrs. M. PUGH "Osborne House".
Mrs. J.I.STUDLEY-EDWARDS "Manor Grange".

Warden-Reception Centre:
Mrs. E. KEEN.
Warden-"Cherry Tree House" (Flatlets for the Aged)
Mrs. I. MORRISON

STATISTICS, etc.

STATISTICS. etc.

(a) As requested by the Ministry of Health, in accordance with Circular 1/68:-

	Wallasey		England & Wales (for comparison)
	1967	1968	1968 (provisional)
Live Births-Males	883	858	-
Females	805	781	-
	1,688	1,639	-
Live birth rate per 1,000 population	16.47	16.07	16.9
Illegitimate live births per cent of total live births	10.25	11.29	-
Still births-Males	26	12	-
Females	15	11	-
	41	23	-
Still Birth Rate per 1,000 total live and still births	23.71	14.44	14.0
Total live and still births	1,729	1,662	-
Infant deaths (deaths under one year)			
Males	21	16	-
Females	24	11	-
	45	27	-
Infant Mortality Rates—			
Total infant deaths per 1,000 total live births	26.66	16.47	18.0
Legitimate infant deaths per 1,000 legitimate live births	24.42	16.50	-
Illegitimate infant deaths per 1,000 illegitimate live births	46.24	16.22	-
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	19.55	7.93	12.3
Early Neo-natal Mortality Rate (deaths under one week per 1,000 total live births)	17.77	7.93	10.5
Perinatal Mortality Rate (Still births and deaths under one week combined per 1,000 total live and still births)	41.06	21.65	25.0
Maternal Mortality (including abortion)-			
Number of deaths	Nil	1	-
Rate per 1,000 total live and still births	0.00	0.60	-

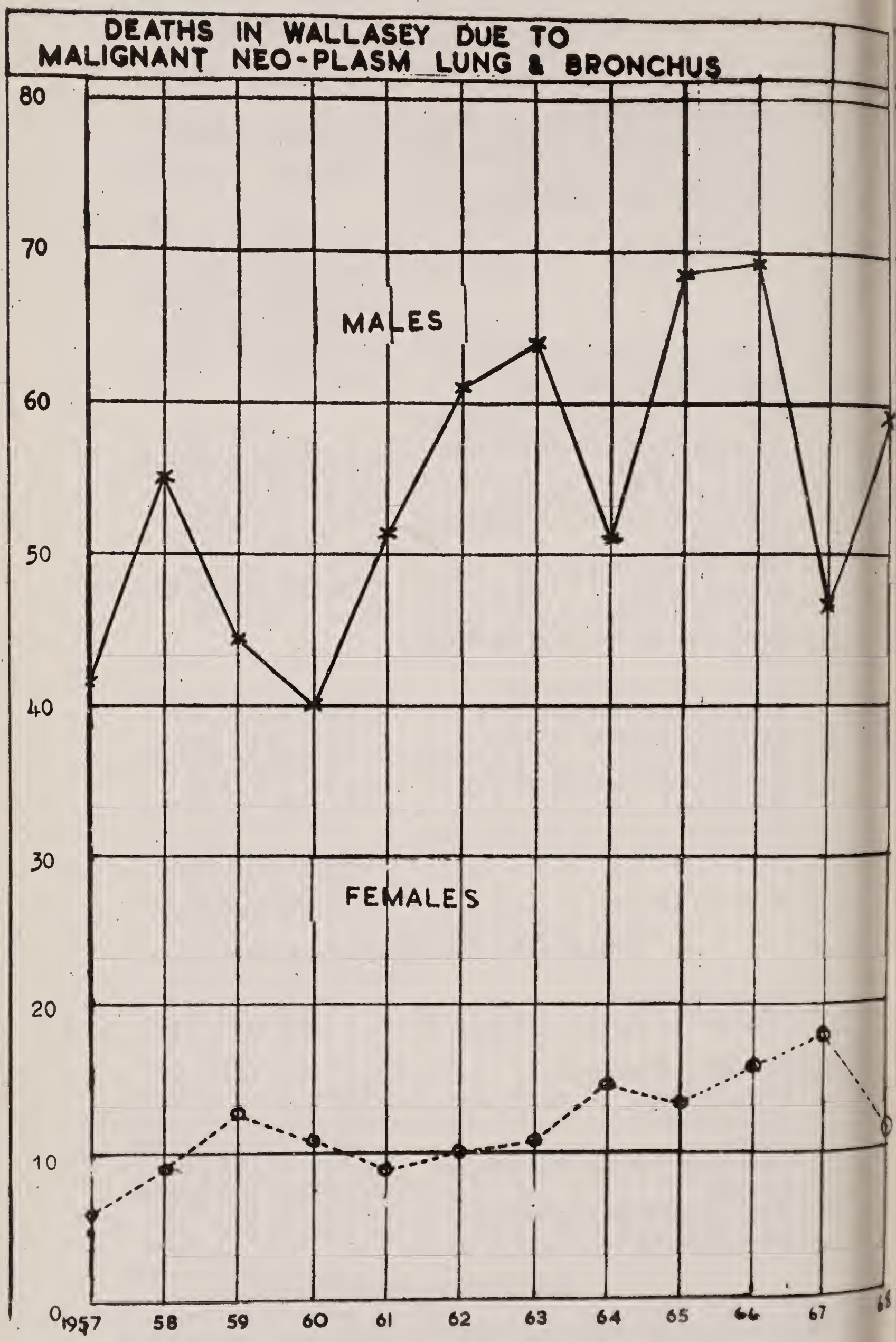
	Wallasey	
	1967	1968
(b) Other details:—		
Census population (April, 1961)	103,213	103,213
Registrar General's estimated population at mid-year	102,470	101,990
Deaths to 31st December		
Males	629	626
Females	679	658
	1,308	1,284
Death rate (unadjusted) per 1,000 of estimated population	12.77	12.59
Death rate per 1,000 of estimated population adjusted by area comparability factor of 0.97 (1968)	12.38	12.21
Death rate per 1,000 of estimated population-England and Wales	11.2	11.9
Phthisis death rate per 1,000 of population.	0.059	0.069
Area in acres as ascertained by Ordnance Survey, January, 1935	5,961	5,961
River and sea frontage Slightly less than 8 miles	-	-
Inhabited houses at 31st December	32,299	32,359
Uninhabited houses at 31st December	700	711
Rateable value of the borough as at 31st December	£3,743,305	£3,775,904
Yield of 1d rate	£15,075	£15,225

PRINCIPAL CAUSES OF DEATH

Heart Disease		444		434
Cancer		261		279
Respiratory Diseases—				
Pneumonia	80)		98)	
Bronchitis	60)	150	60}	172
Other	10)		14)	
Vascular lesions of nervous system		180		165
Violent Deaths (including suicides)		36		27

MATERNAL MORTALITY

There was one maternal death in Wallasey during 1968.


DEATHS IN WALLASEY DUE TO
MALIGNANT NEO-PLASM LUNG & BRONCHUS
80
70
60
50
40
30
20
10
0
MALES
FEMALES
1957
58
59
60
61
62
63
64
65
66
67
68

SUMMARY OF DEATHS DURING THE YEAR 1968.

CAUSE OF DEATH	Sex	Total All Ages	Under 4 weeks	4 weeks and under 1 year	AGE IN YEARS 1-	5-	15-	25-	35-	45-	55-	65-	75 and over
B5 Tuberculosis of Respiratory System	M	5	-	-	-	-	-	-	-	-	1	3	1
	F	2	-	-	-	-	-	-	-	-	1	1	-
B6 Other Tuberculosis, Incl. Late Effects	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	3	-	-	-	-	-	-	-	-	1	1	1
B18 Other Infective & Parasitic Diseases	M	1	-	-	-	-	-	-	-	-	-	1	-
	F	1	-	-	1	-	-	-	-	-	-	-	-
B19(1) Malignant Neoplasm - Stomach	M	16	-	-	-	-	-	-	-	-	8	4	4
	F	13	-	-	-	-	-	-	-	-	3	6	4
B19(2) Malignant Neoplasm - Lung, Bronchus	M	59	-	-	-	-	-	1	1	5	22	18	12
	F	11	-	-	-	-	-	-	-	3	-	7	1
B19(3) Malignant Neoplasm - Breast	M	1	-	-	-	-	-	-	-	-	-	1	-
	F	20	-	-	-	-	-	-	3	3	7	4	3
B19(4) Malignant Neoplasm - Uterus	F	12	-	-	-	-	-	-	-	3	2	4	3
B19(5) Leukaemia	M	8	-	-	-	1	-	-	-	-	1	4	2
	F	2	-	-	-	-	-	-	-	-	-	-	2
B19(6) Other Malignant Neoplasms, etc.	M	68	-	-	-	-	2	3	-	4	22	21	16
	F	66	-	-	-	-	-	-	-	4	14	23	25
B20 Benign and Unspecified Neoplasms	M	3	-	-	-	-	-	-	1	2	-	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
B21 Diabetes Mellitus	M	3	-	-	-	-	-	-	-	-	-	1	2
	F	5	-	-	-	-	-	-	-	-	1	2	2
B46(1) Other Endocrine Etc. Diseases	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	3	-	-	-	-	-	-	-	1	-	1	1
B23 Anaemias	M	1	-	-	-	-	-	-	-	-	-	-	1
	F	6	-	-	-	-	-	-	-	-	-	2	4
B46(3) Mental Disorders	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	-	1
B46(4) Other Diseases of Nervous System, Etc.	M	5	-	-	-	-	-	1	-	1	1	1	1
	F	4	-	-	-	-	-	1	-	-	-	2	1
B26 Chronic Rheumatic Heart Disease	M	6	-	-	-	-	-	-	-	-	4	1	1
	F	8	-	-	-	-	-	-	-	2	4	2	-
B27 Hypertensive Disease	M	8	-	-	-	-	-	1	-	-	-	3	4
	F	12	-	-	-	-	-	-	-	-	3	-	9
B28 Ischaemic Heart Disease	M	168	-	-	-	-	-	1	3	24	38	54	48
	F	162	-	-	-	-	-	1	1	6	22	56	76
B29 Other Forms of Heart Disease	M	28	-	-	-	-	-	-	-	1	1	5	21
	F	42	-	-	-	-	-	-	-	-	1	6	35
B30 Cerebrovascular Disease	M	66	-	-	-	-	-	-	-	6	10	23	27
	F	99	-	-	-	-	-	-	1	2	11	17	68
B46(5) Other Diseases of Circulatory System	M	26	-	-	-	-	1	-	-	-	1	12	12
	F	34	-	-	-	-	-	-	-	2	4	2	26
B31 Influenza	M	1	-	-	-	-	-	-	-	-	-	-	1
	F	3	-	-	-	-	-	-	-	-	-	1	2
B32 Pneumonia	M	41	-	7	-	1	-	-	-	-	3	16	14
	F	57	-	4	1	-	-	-	-	-	1	6	45
B33(1) Bronchitis and Emphysema	M	50	-	-	-	-	-	-	-	1	16	18	15
	F	10	-	-	-	-	-	-	-	-	2	3	5
B33(2) Asthma	M	2	-	-	-	-	1	-	-	-	-	-	1
	F	2	-	-	-	-	-	1	1	-	-	-	-
B46(6) Other Diseases of Respiratory System	M	4	-	1	-	-	-	-	-	-	-	2	1
	F	6	-	-	1	-	-	-	-	-	-	3	2
B34 Peptic Ulcer	M	7	-	-	-	-	-	-	-	2	1	1	3
	F	9	-	-	-	-	-	-	-	-	-	2	7
B35 Appendicitis	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	1	-	-	-
B36 Intestinal Obstruction & Hernia	M	3	-	-	-	-	-	-	-	-	1	1	1
	F	3	-	-	-	-	-	-	-	-	1	-	2
B37 Cirrhosis of Liver	M	3	-	-	-	-	-	-	1	2	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	-	1
B46(7) Other Diseases of Digestive System	M	2	-	-	-	-	-	-	-	-	-	1	1
	F	14	-	-	-	-	-	-	-	-	1	4	9
B38 Nephritis and Nephrosis	M	4	-	-	-	-	-	-	-	1	2	-	1
	F	1	-	-	-	-	-	-	-	-	-	-	1
B39 Hyperplasia of Prostate	M	2	-	-	-	-	-	-	-	-	-	-	2
B46(8) Other Diseases, Genito-Urinary System	M	5	-	-	-	-	-	-	1	-	-	3	1
	F	7	-	-	-	-	-	-	1	-	-	1	5
B40 Abortion Inquest 14/11/68 - Miscarriage	F	1	-	-	-	-	1	-	-	-	-	-	-
B46(10) Diseases of Musculo-Skeletal System	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	3	-	-	-	1	-	-	-	-	-	1	1
B42 Congenital Anomalies	M	8	5	1	-	-	1	-	1	-	-	-	-
	F	3	1	1	-	-	-	1	-	-	-	-	-
B43 Birth Injury, Difficult Labour, Etc.	M	2	2	-	-	-	-	-	-	-	-	-	-
	F	3	3	-	-	-	-	-	-	-	-	-	-
B44 Other Causes of Perinatal Mortality	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	2	2	-	-	-	-	-	-	-	-	-	-
B45 Symptoms and Ill-Defined Conditions	M	3	-	-	-	-	-	-	-	-	-	1	2
	F	16	-	-	-	-	-	-	-	-	-	-	16
BE47 Motor Vehicle Accidents	M	3	-	-	-	-	1	-	1	-	1	-	-
	F	3	-	-	-	-	-	-	1	-	1	-	1
BE48 All Other Accidents	M	6	-	-	1	-	-	1	-	-	2	1	1
	F	5	-	-	1	-	-	-	-	-	-	1	3
BE49 Suicide & Self-Inflicted Injuries	M	8	-	-	-	1	-	3	2	1	1	-	-
	F	2	-	-	-	-	-	-	-	-	1	1	-
TOTAL ALL CAUSES	M	626	7	9	1	3	6	11	11	50	136	196	196
	F	658	6	5	4	1	1	4	8	27	81	159	362

B32 Pneumonia	M	41	-	7	-	1	-	-	-	-	3	16	14
	F	57	-	4	1	-	-	-	-	-	1	6	45
B33(1) Bronchitis and	M	50	-	-	-	-	-	-	-	1	16	18	15
Emphysema	F	10	-	-	-	-	-	-	-	-	2	3	5
B33(2) Asthma	M	2	-	-	-	-	1	-	-	-	-	-	1
	F	2	-	-	-	-	-	1	1	-	-	-	-
B46(6) Other Diseases of	M	4	-	1	-	-	-	-	-	-	-	2	1
Respiratory System	F	6	-	-	1	-	-	-	-	-	-	3	2
B34 Peptic Ulcer	M	7	-	-	-	-	-	-	-	2	1	1	3
	F	9	-	-	-	-	-	-	-	-	-	2	7
B35 Appendicitis	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	1	-	-	-
B36 Intestinal	M	3	-	-	-	-	-	-	-	-	1	1	1
Obstruction & Hernia	F	3	-	-	-	-	-	-	-	-	1	-	2
B37 Cirrhosis of Liver	M	3	-	-	-	-	-	-	1	2	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	-	1
B46(7) Other Diseases of	M	2	-	-	-	-	-	-	-	-	-	1	1
Digestive System	F	14	-	-	-	-	-	-	-	-	1	4	9
B38 Nephritis and	M	4	-	-	-	-	-	-	-	1	2	-	1
Nephrosis	F	1	-	-	-	-	-	-	-	-	-	-	1
B39 Hyperplasia of	M	2	-	-	-	-	-	-	-	-	-	-	2
Prostate													
B46(8) Other Diseases,	M	5	-	-	-	-	-	-	1	-	-	3	1
Genito-Urinary System	F	7	-	-	-	-	-	-	1	-	-	1	5
B40 Abortion Inquest	F	1	-	-	-	-	1	-	-	-	-	-	-
14/11/68 - Miscarriage													
B46(10) Diseases of	M	-	-	-	-	-	-	-	-	-	-	-	-
Musculo-Skeletal System	F	3	-	-	-	1	-	-	-	-	-	1	1
B42 Congenital Anomalies	M	8	5	1	-	-	1	-	1	-	-	-	-
	F	3	1	1	-	-	-	1	-	-	-	-	-
B43 Birth Injury,	M	2	2	-	-	-	-	-	-	-	-	-	-
Difficult Labour, Etc.	F	3	3	-	-	-	-	-	-	-	-	-	-
B44 Other Causes of	M	-	-	-	-	-	-	-	-	-	-	-	-
Perinatal Mortality	F	2	2	-	-	-	-	-	-	-	-	-	-
B45 Symptoms and Ill-	M	3	-	-	-	-	-	-	-	-	-	1	2
Defined Conditions	F	16	-	-	-	-	-	-	-	-	-	-	16
BE47 Motor Vehicle	M	3	-	-	-	-	1	-	1	-	1	-	-
Accidents	F	3	-	-	-	-	-	-	1	-	1	-	1
BE48 All Other	M	6	-	-	1	-	-	1	-	-	2	1	1
Accidents	F	5	-	-	1	-	-	-	-	-	-	1	3
BE49 Suicide & Self-	M	8	-	-	-	1	-	3	2	1	1	-	-
Inflicted Injuries	F	2	-	-	-	-	-	-	-	-	1	1	-
TOTAL ALL CAUSES	M	626	7	9	1	3	6	11	11	50	136	196	196
	F	658	6	5	4	1	1	4	8	27	81	159	362

TABLE SHOWING (a) Infant Deaths and Death Rates.
(b) Neo-natal deaths and Death Rates.
(c) Deaths and Death Rates (infants 4 weeks to 12 months).

Infants			Neo-natal			4 weeks-12 months		
Year	Deaths	Rate per 1,000 Births	Deaths	Rate per 1,000 Births	% of Total Infant Deaths	Deaths	Rate per 1,000 Births	% of Total Infant Deaths
1947	111	51.1	57	26.9	51.35	54	25.09	48.65
1948	78	43.5	38	20.67	48.72	40	22.35	51.28
1949	64	35.8	34	19.0	53.13	30	16.82	46.87
1950	49	28.7	28	16.41	57.14	21	12.31	42.86
1951	55	32.4	35	20.62	63.63	20	11.19	36.37
1952	56	33.3	43	25.62	76.78	13	7.75	23.22
1953	41	24.7	29	17.51	70.74	12	7.25	29.26
1954	43	25.1	29	16.94	67.44	14	8.12	32.56
1955	41	25.4	29	17.96	70.74	12	7.44	29.26
1956	42	24.07	31	17.77	73.81	11	6.30	26.19
1957	48	26.10	33	17.94	68.75	15	8.16	31.25
1958	44	24.69	32	17.96	72.73	12	6.73	27.27
1959	48	26.06	37	20.09	77.08	11	5.97	22.92
1960	45	24.32	29	15.68	64.44	16	8.64	35.56
1961	36	19.38	24	12.92	66.67	12	6.46	33.33
1962	61	31.25	42	21.52	68.85	19	9.73	31.15
1963	48	24.60	41	21.01	85.42	7	3.59	14.58
1964	40	19.90	34	16.92	85.00	6	2.99	15.00
1965	36	19.54	24	13.03	66.67	12	6.51	33.33
1966	35	19.67	19	10.68	54.2	16	8.99	45.8
1967	45	26.66	33	19.55	73.3	12	7.11	26.7
1968	27	16.47	13	7.93	48.2	14	8.54	51.8

TABLE SHOWING the Local Adjusted Infantile Mortality rates of the Borough as compared with the figure for the whole of England and Wales for the census years from 1901 to 1951 and consecutive years to 1968.

Year	Wallasey	England and Wales
1901	142.0	151
1911	109.0	130
1921	59.0	83
1931	44.8	66
1941	78.9	60
1951	32.4	29
1952	33.3	27
1953	24.7	27
1954	25.1	25
1955	25.4	25
1956	24.07	24
1957	26.10	23
1958	24.69	23
1959	26.06	22
1960	24.32	22
1961	19.38	22
1962	31.25	22
1963	24.60	21
1964	19.90	20
1965	19.54	19
1966	19.67	19
1967	26.66	18
1968	16.96	18

ILLEGITIMACY

During the year there were 185 illegitimate live births (100 Male: 85 Female) recorded by the Registrar-General as belonging to the Borough, compared with 173 in 1967. This gives an illegitimate birthrate of 112.9 per thousand total live births, as compared with 102.5 in 1967.

There were three deaths of illegitimate children during the year. There were two illegitimate still births.

ECONOMIC CONDITIONS

The number of unemployed persons in the borough in January, 1968 was 1,154, and in December it was 1,093 compared with 1,179 and 1,109 in January and December, 1967 respectively.

The following numbers and amounts of Unemployment and Supplementary Benefit payments were made by the Wallasey Employment Exchange during 1968:-

Total No. of Payments of Unemployment Benefit.	35,303
Total No. of Supplementary Benefit Payments.	20,241
Total Amount of Unemployment Benefit paid.	£246,598. 3s. 5d.
Total Amount of Supplementary Benefit paid.	£117,797. 14s. 8d.
Grand Total paid.	£364,395. 18s. 1d.

Occurrence and Control of Infectious Diseases

CASES OF INFECTIOUS AND OTHER NOTIFIABLE DISEASES NOTIFIED IN WALLASEY DURING 1968

NOTIFIABLE DISEASES	Totals	Cases notified at ages										
		under 1	1	2	3	4	5-9	10-14	15-24	25-44	45-64	65 & over
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-
Infective Hepatitis △	54	-	1	1	-	2	11	12	13	8	5	1
Malaria	-	-	-	-	-	-	-	-	-	-	-	-
Food Poisoning	23	-	-	-	-	-	-	-	7	4	1	11
Dysentery	72	-	2	3	3	8	39	8	3	6	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas +	2	-	-	-	-	-	-	-	-	1	-	1
Scarlet Fever	44	-	2	5	2	5	28	-	1	1	-	-
Paratyphoid	-	-	-	-	-	-	-	-	-	-	-	-
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia +	3	-	-	-	-	-	-	-	2	1	-	-
Acute Meningitis	3	1	-	-	-	-	2	-	-	-	-	-
Acute Poliomyelitis (Paralytic)	-	-	-	-	-	-	-	-	-	-	-	-
Acute Poliomyelitis (Non-Paralytic)	-	-	-	-	-	-	-	-	-	-	-	-
Pneumonia +	14	-	2	-	-	-	-	-	3	2	5	2
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-	-
Pulmonary Tuberculosis	36	-	-	-	-	-	-	1	3	8	15	9
Other forms of ..do..	4	-	-	-	-	1	-	-	1	1	1	-
Measles	322	24	39	53	51	46	97	2	4	-	-	-
Whooping Cough	56	5	6	9	10	6	17	3	-	-	-	-
Acute Encephalitis	3	1	1	1	-	-	-	-	-	-	-	-
Anthrax	-	-	-	-	-	-	-	-	-	-	-	-
Cholera	-	-	-	-	-	-	-	-	-	-	-	-
Leprosy	-	-	-	-	-	-	-	-	-	-	-	-
Leptospirosis	1	-	-	-	-	-	-	-	-	1	-	-
Plague	-	-	-	-	-	-	-	-	-	-	-	-
Relapsing Fever	-	-	-	-	-	-	-	-	-	-	-	-
Typhus	-	-	-	-	-	-	-	-	-	-	-	-
Yellow Fever	-	-	-	-	-	-	-	-	-	-	-	-
Tetanus	-	-	-	-	-	-	-	-	-	-	-	-
	637	31	53	72	66	68	194	26	37	33	27	24

\+ Not notifiable w.e.f. 30.9.68

△ Compulsorily notifiable w.e.f. 15.6.68

INFECTIOUS DISEASES - INVESTIGATIONS AND VISITS OF SURVEILLANCE

During the year a total of 1177 visits were made by the health visitors and public health inspectors to infectious cases and contacts as follows:—

	Enquiry Visits	Visits of Surveillance	Total Visits
Health Visitors	391	597	988
Public Health Inspectors	22	167	189
	413	764	1177

A total of 563 specimens were submitted to the Public Health Laboratory in connection with the investigations of cases of food poisoning and dysentery.

Diphtheria

No cases of diphtheria were notified during the year. In fact there have been no cases of diphtheria notified in Wallasey during the last thirteen years, i.e. 1956-1968. This is of course, highly satisfactory. Unfortunately, there is the danger of being drawn into a false sense of security. The percentage of school children who are adequately protected against this disease is falling. Parents are tending to become complacent about the need for immunisation. It must, therefore, be re-emphasised to parents that only through immunisation will the present very satisfactory position be maintained.

Scarlet Fever

44 cases of scarlet fever were notified during 1968 compared with 44 cases in 1967 and 59 in 1966. There were no deaths.

This infectious disease is of a very mild type compared with that of twenty or thirty years ago, so much so that many doctors in the borough do not notify cases. Notification is, however, important when a food handler is concerned.

Puerperal Pyerxia

There were 3 notifications of puerperal pyrexia during the year, none of which proved fatal.

Ophthalmia Neonatorum

There were no cases of ophthalmia neonatorum notified during the year.

Whooping Cough

56 cases were notified during the year. Of these, 21 had received a full course of immunisation against whooping cough. No case was fatal.

Measles

There were 322 cases of measles notified during 1968 compared with 182 in 1967. The disease was a mild type with few complications. There were no deaths.

A scheme for immunisation against measles was started during the year, details of which can be found on page 47.

Poliomyelitis

There were no cases of poliomyelitis during the year.

Acute Meningitis

There were three cases of acute meningitis notified, a boy aged five years, a girl of four months and a girl aged five years. All made good recoveries without sequelae. All were meningococcal infections.

Smallpox

No case of smallpox occured during the year.

Paratyphoid/Typhoid Fever

There were no cases of paratyphoid or typhoid fever during 1968.

Poisoning

There were twenty three cases of Food Poisoning notified during 1968.

Dysentery

There were 72 confirmed cases of sonne dysentery during the year. Visits of surveillance were made by health visitors and public health inspectors, and specimens were submitted to the Public Health Laboratory for bacteriological examination. All cases were kept under surveillance until three consecutive specimens were found to be free from pathogenic organisms.

Acute Encephalitis

There were three cases of acute encephalitis during the year:- A girl aged eighteen months who died. The

cause of death being Cerebral Damage due to Viral Encephalitis. A girl aged thirteen months also diagnosed as Viral Encephalitis: Unfortunately a report from the Peadiatrician in charge of this case indicated severe residual retardation. A baby aged four months was admitted to St. Catherines Hospital with Infective Encephalitis. A good recovery was made and the health visitor reports normal development.

Pneumonia

There were fourteen cases of pneumonia notified during the year, one of these was influenzal. From the 30th of September this disease ceased to be notifiable, thus no comparison can be made with last years figures. There were 98 deaths from pneumonia and four from influenza during the year.

Infective Hepatitis

This disease was made compulsorily notifiable from 15th June. Up to this date it was notifiable on a local basis only.

There were 54 cases notified over the whole year and there was no evidence to suggest that any of these cases were due to the virus being conveyed at the time of injections or transfusions etc.

PERSONAL HEALTH SERVICES

Services provided under Part III of The National Health Service Act, 1946.

Special report on co-ordination and co-operation of the Health Department's Services with the Hospital and Family Doctor services.

Section 21—Health Centres.
" 22—Care of Mothers and Young Children.
" 23—Midwifery Services.
" 24—Health Visiting.
" 25—Home Nursing.
" 26—Vaccination and Immunisation.
" 27—Ambulance Service.
" 28—Prevention of Illness—Care and After-Care.
" 29—Domestic Help Service.
" 28 and 51—Mental Health Services.

THE CO-ORDINATION AND CO-OPERATION OF THE HEALTH DEPARTMENT'S SERVICES WITH THE HOSPITAL AND FAMILY DOCTOR SERVICES.

The Ministry of Health has again asked that particular reference to the above be made in this report. The three branches of the Health Service, namely the General Practitioner Services; the Hospital and Specialist Services; and the Local Health Authority Services continue to work in close co-operation in Wallasey. A joint "Health and Welfare Service" Handbook has been published and this gives details of all three services.

(a) Co-operation with Hospital Services.

(i) Since the inception of the National Health Service Act the North Wirral Hospital Management Committee has been represented on the Health Committee. The representative has full voting rights.

(ii) The Medical Officer of Health is a member of the Hospital Management Committee and as such, serves on various House Committees and Sub-Committees.

(iii) The Medical Officer of Health attends Liaison meetings with the Liverpool Regional Hospital Board's Medical staff and also represents the authority on the Liverpool Regional Hospital Board Joint Health Advisory Committee.

(iv) The department is given full details of all pre-school and school children discharged from hospital. This facilitates any necessary follow-up by the health visiting and school health service staffs, as appropriate.

(v) The number of 'early discharges' including those at 48 hours, from the local Maternity Hospital (which is a General Practitioner Unit) has increased very appreciably in recent years. These numbered 1,209 in 1968 compared with 1,195 in 1967 and 981 in 1966. Most of these are planned well in advance, thus allowing for the inspection of the home by a domiciliary midwife who advises the hospital whether or not the conditions are such that early discharge is desirable. The department is notified by telephone when the discharge is imminent, thus ensuring that the appropriate services are available without delay.

(vi) The domiciliary midwives make full use of the Obstetric and Paediatric Flying Squad if an emergency arises, and they accompany any premature infant to the hospital, who requires specialised treatment available only at the Premature Baby Unit at St. Catherine's Hospital, Birkenhead.

(vii) Many requests are received, directly from Consultants or through the Medical Social Workers of the hospitals for the provision of appropriate domiciliary services on discharge from hospital including the Home Help Service; District Nursing Service; Health Visiting Service, etc. Applications are also made for placement of patients in Homes for the Aged provided in accordance with Sec. 21 of the National Assistance Act; Rehousing on Medical Grounds; Provision of equipment and the carrying out of adaptations in the homes of handicapped persons, etc.

(viii) A Hospital Transport Officer was appointed in 1966 to co-ordinate the requests for admission and discharge of patients by ambulance. He holds the rank of Station Officer of the Ambulance Service and is based at Victoria Central Hospital. 50% of his salary is paid by the Local Authority and 50% by the Hospital Management Committee.

(ix) A health visitor attends the geriatric unit at Mill Lane Hospital on one morning per week to discuss the probable social and medical needs of the elderly patient on his/her return from hospital.

(x) Two tuberculosis visitors of the local authority continue to carry out their duties from the Chest Clinic, Mill Lane, and work in close liaison with the Consultant Chest Physicians. They also take part in the School B.C.G. vaccination scheme, thus ensuring the complete "follow-up" of children found to be strongly Mantoux positive.

(xi) Mental Welfare staff attend case conferences at the Deva and Moston Psychiatric Hospitals whenever possible. This liaison with the Consultant Psychiatrists provides the opportunity of planning appropriate after-care of the patient when he/she is discharged from hospital. In conjunction with the Superintendent of "Chapel Hey" Mental Health Hostel, arrangements are made for the transfer of patients to this Local Authority's Rehabilitation Hostel, details of which are given in the Mental Health Section of this Report.

(xii) Much helpful advice was given by the Consultant Gynaecologist and Pathologist in setting up our cervical cytology clinics.

(b) With Family Doctor Services.

(i) Since the inception of the National Health Service Act, both the Local Medical Committee and Executive Council are represented on the Health Committee, each representative having full voting rights.

(ii) A newsletter is forwarded periodically to all general practitioners in the borough, giving details of the occurence of infectious diseases; the introduction of new services and the changes in the existing domiciliary services of the Local Authority.

(iii) As mentioned in the report for 1967, a health visitor attends a Group Practice in the Moreton Area, three times weekly, to discuss cases and social problems and carry out visits as appropriate.
During the year a further scheme of this nature started with a Group Practice comprising five doctors in the Wallasey Village area. In addition a district nurse is allocated to this group of doctors to give treatment as necessary at the Centre. She also receives instructions direct from the doctors about their patients to be nursed in their own homes.
A scheme has been operating for several years whereby the health visiting staff attend the weekly ante-natal clinics of two doctors. The same health visitors attend each week.
At the end of the year a total of 13 general practitioners were involved in the attachment schemes referred to above.

(iv) Health visitors are available on request from general practitioners for visits to elderly patients on their lists. The number of requests of this nature is increasing, and during the year 1,248 visits were made to 552 elderly persons.

(v) All the domiciliary services of the Health Department are available to assist the general practitioner in the care of the sick and elderly patient on his list and most general practitioners in the borough continue to care for their elderly patients after admission to Welfare Homes.

(vi) Full information of the results obtained at the Cervical Cytology Clinic are conveyed to the general practitioners so that any necessary treatment can be arranged by him.

(vii) Details of liaison with general practitioners regarding Health Centres are given in the following section of the report.

SERVICES PROVIDED UNDER PART III OF THE NATIONAL HEALTH SERVICE ACT, 1946.

SECTION 21 — HEALTH CENTRES

No Health Centres have been constructed or are in course of construction in Wallasey.

As stated in the last report, talks were proceeding at the beginning of the year with the general practitioners regarding the setting up of a Health Centre in the north end of the borough to accommodate twelve doctors, local authority and ancilliary services. Unfortunately, due to the present financial restrictions, the project was deferred.

SECTION 22 - CARE OF MOTHERS AND YOUNG CHILDREN.

Ante-Natal Clinics

The ante-natal clinics which are conducted by the domiciliary midwives are held in various parts of the borough, as follows:-

Monday evenings at Merton Road Clinic	6 p.m. to 7 p.m.
Tuesday evenings at Water Street Clinic	6 p.m. to 7 p.m.
Thursday evenings at Moreton Clinic	6 p.m. to 7 p.m.
Tuesday evenings at Leasowe Clinic	6 p.m. to 7 p.m.

During the year 135 mothers made 565 attendances at these clinics.

This is in keeping with the general trend of there being a decline in numbers attending, due to the fewer numbers of domiciliary confinements consequent upon the very high percentage of confinements in hospital in this borough. The continuing decline is illustrated in the following statistics:-

Year	No. of mothers attending	Attendances
1965	341	1,282
1966	225	906
1967	166	701
1968	135	565

It is of paramount importance that the expectant mother should realise the significance of a well balanced diet, a high standard of hygiene and adequate rest, and the value of health education in ante-natal care cannot be over emphasised.

A health visitor attends each clinic to give lectures on health education, whilst mothercraft classes are also held.

Owing to the difficulties of recruitment it is regretted that the services of a physiotherapist were not available to conduct relaxation classes.

Post Natal Examination

No local authority post natal clinics are held, but the health visitors and midwives stress the importance of patients attending their family doctor for post natal examination.

Care of Premature Babies

A premature infant is one weighing five and a half pounds or less at birth, and the table following gives details of the premature births during the year:-

PREMATURE LIVE BIRTHS

Weight at birth	Born in hospital				Born at home or in nursing home								Still Births Premature	
					Nursed entirely at home or in nursing home				Transfered to hospital on or before 28th day					
	Total Births	Died			Total Births	Died			Total Births	Died			Born	
		Within 24 hrs of birth	In 1 and under 7 days	In 7 and under 28 days		Within 24 hrs of birth	In 1 and under 7 days	In 7 and under 28 days		Within 24 hrs of birth	In 1 and under 7 days	In 7 and under 28 days	In hospital	At home or in nursing home
3 lb. 4 oz. or less (1,500 gms. or less)	5	2	-	-	-	-	-	-	-	-	-	-	6	-
Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,501-2,000 gms.)	18	2	2	-	-	-	-	-	2	-	-	-	8	2
Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,001-2,250 gms.)	25	-	2	-	-	-	-	-	-	-	-	-	-	-
Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,251 2,500 gms.)	54	-	-	-	2	-	-	-	-	-	-	-	1	-
TOTALS ..	102	4	4	-	2	-	-	-	2	-	-	-	15	2

The services of a well equipped Premature Baby Unit at St. Catherine's Hospital, Birkenhead, are readily available, and whenever necessary, premature babies are admitted to this unit for special attention. The ambulance vehicle is fitted with an incubator to convey the babies to hospital.

There is close liaison with the hospital staffs and on discharge, the department is given details of the child's condition and methods of feeding, etc. The details are initially given by telephone, so there is no delay in the provision of the appropriate services.

In those cases where a premature baby is cared for at home, there is close liaison between the domiciliary midwifery and health visiting staffs. Scales for weighing premature infants are available on free loan from the Health Department and 13 families took advantage of this service during the year.

Stillbirths.

There were 23 stillbirths during the year certified by (a) doctors 22 (b) midwives 1.

Causes of Stillbirths.

Ante-partum haemorrhage	2
Placenta unhealthy calcified	1
Intra uterine death placental insufficiency	1
Marked placental infarction pre-eclamptic toxaemia and a degree of Steinleventual syndrome	1
Intra uterine anoxia - pre-eclamptic toxaemia	2
Intra uterine asphyxia - premature seperation of placenta	1
Intra uterine asphyxia - hypertension in pregnancy	1
Foetal asphyxia - prolapsed cord premature labour	1
Cord round neck	1
Anencephaly	2
Meningocele	1
Prematurity	1
Foetal Anoxia - severe rhesus incompatibility	2
Post maturity (diabetes mellitus) mother	1
Intra uterine death - cause unknown - macerated	2
Concealed accidental haemorrhage (twins)	2
Asphyxia atelectasis	1
	23

Infant Deaths.

Total deaths under 12 months	27
Neo-natal deaths (deaths under 28 days)	13
Early neo-natal deaths (deaths under 7 days)	13
Other infant deaths (one month to 12 months)	14

Causes of early neo-natal deaths (under 7 days)

Cerebral haemorrhage	4
Prematurity	2
Cerebral haemorrhage - prematurity - hyaline membrane disease	1
Atelectasis and prematurity	1
Adrenal haemorrhage - intrapartum asphyxia	1
Hydrocephalic achondroplastic child	1
Congenital heart disease (coarctation of aorta)	1
Open Meningomyelocele	1
Pulmonary atelectasis - tentorial laceration	1
	13

Causes of Death (one month - 12 months)

Bronchopneumonia	10*
Septicaemia - ventriculitis hydrocephalus meningomyelocele	1
Inanition prematurity hydrocephaly	1
Acute pneumonitis	1
Cardiac failure acute laryngotracheo bronchitis	1
	14

*H.M. Coroner gave the death certificate in all ten cases.

Congenital Malformations Apparent at Birth.

During the year, 30 malformations apparent at birth were notified (26 in respect of 23 live births and 4 in respect of 4 still births).

These are summarised in the following table:-

Conditions	Live	Still	Total
Central Nervous System	3	4	7
Eye, Ear	1	-	1
Alimentary System	5	-	5
Heart & Great Vessels	1	-	1
Respiratory system	-	-	-
Uro-genital system	3	-	3
Limbs	8	-	8
Other skeletal	2	-	2
Other systems	1	-	1
Other malformations	2	-	2
	26	4	30

The scheme for notifying these malformations continued as in previous years. Any such malformation is recorded by the doctor or midwife on the birth notification which is forwarded to the Medical Officer of Health. A return is made to the General Register Office of every child in the borough (identified only by a number) in respect of whom information has been received of malformation or malformations apparent at birth.

In the previous year 42 malformations were notified (34 in respect of 30 live births and 8 in respect of 6 still births).

Child Health Clinics

Dr. W.F. Christian, Deputy Medical Officer of Health reports as follows:-

The main work of these Clinics can be summarised as follows:-

(a) To give advice on the rearing of children - ranging from the early problems of infant feeding to the emotional problems of the toddler and pre-school child.
(b) To medically examine babies at their first attendance and as necessary, subsequently, including testing the urine for phenylketonuria.
(c) To advise parents on specific problems which they bring to the health visitor or medical officer.
(d) To educate parents on all matters pertaining to health.
(e) To immunise babies against diphtheria, whooping cough, tetanus and poliomyelitis.

Nowadays less emphasis is placed on routine weekly weighing of the child and more attention is paid to assessments of development. When deafness is suspected arrangements are made for the health visitors to test the child's hearing using special techniques which have been learned during in-service training.
I would like to take this opportunity to thank those ladies who regularly give their services voluntarily in assisting the health visitors in running the baby clinics.
The clinics, at which a doctor attends on each occasion are as follows:-

Health Clinic, Hudson Road,
Leasowe. Mondays: 2.0 - 4.30 p.m.
" " Oakenholt Road,
Moreton. Tuesdays: 2.0 - 4.30 p.m.
" " Water Street,
Wallasey. Tuesdays: 2.0 - 4.30 p.m.
Parish Hall, Wallasey Village,
Wallasey. Wednesdays: 2.0 - 4.30 p.m.
Congregational Hall.
Princess Road,
Wallasey. Thursdays: 2.0 - 4.30 p.m.
Trinity Church Hall,
Manor Road,
Wallasey. Thursdays: 2.0 - 4.30 p.m.

The number of attendances during the year was:-

	Water Street	Moreton	Princess Road	Wallasey Village	Trinity Hall Liscard	Leasowe	Totals
Children under one year of age	1,967	2,077	1,915	2,299	1,262	1,340	10,860
Children between one and five years	795	316	521	626	501	529	3,288

Toddlers Clinic

Number of children called up 400
Number who attended 161

Welfare Foods Service

National Dried Milk, cod liver oil, orange juice and vitamin tablets were available as follows:-

MORNING	AFTERNOON
9.0. a.m. to 12.15 p.m.	2.0. p.m. to 4.30. p.m. (Unless otherwise shown).
MONDAY	
25a, Liscard Village	25a, Liscard Village 2.0 p.m. to 5.0 p.m.
	Health Clinic Hudson Road, LEASOWE. 2.0 p.m. to 4.30 p.m.
TUESDAY	
25a, Liscard Village	Water Street Clinic
	Health Clinic, Oakenholt Road, MORETON.
WEDNESDAY	
25a, Liscard Village	Parish Hall, Wallasey Village.
THURSDAY	
25a, Liscard Village	25a, Liscard Village, 2.0 p.m. to 5.0 p.m.
	Princess Road, Rake Lane.
FRIDAY	
Health Clinic, Oakenholt Road, MORETON.	Health Clinic, Oakenholt Road, MORETON.
25a, Liscard Village	25a, Liscard Village. 2.0 p.m. to 5.0 p.m.
SATURDAY	
25a, Liscard Village	

In view of the fall in sales, distribution was discontinued from the Boys' Club, Oakdale Road, as from January 1968.

Details of the numbers of packets, etc., distributed during the year are as follows:-

	1962	1963	1964	1965	1966	1967	1968
National Dried Milk ..							
Number of packets given free..	1,279	1,183	1,027	630	575	714	465
Number of packets sold	23,292	21,962	22,341	19,172	16,235	9,073	6,381
Cod Liver Oil, Orange Juice, etc.							
Number of bottles of:							
Cod Liver Oil	2,290	2,162	2,204	2,197	1,980	1,992	1,798
Vitamin Capsules	2,964	3,085	3,278	2,680	2,352	2,076	1,998
Orange Juice (Free)..	698	467	203	196	474	828	417
" " (Sold)..	16,004	16,666	18,481	19,078	19,146	18,938	18,659

During the year, the number of packets of dried milk (other than National dried milk) cereals, etc., sold at the clinics was 25,694 realising a total of £3,552. 12s. 4d. compared with 27,702 packets sold in 1967 which realised £3,690. 19s. 9d. The reduced income is due to a general fall in the numbers attending the clinics.

Family Planning

In April 1968 a full report was made to the Health Committee on the implementation of the National Health Service (Family Planning) Act, 1967. The Act extends the powers of Local Authorities to enable them to provide (or arrange for other bodies to provide) advice on contraception and supplies for any persons who need them on social grounds and not as hitherto, in medical cases only.

It was decided to approach the Family Planning Association to provide these services on an agency basis and I am pleased to report that the Association has co-operated to the full in this matter.

Payment is made on a per capita basis.

The clinic conducted by the Merseyside Family Planning Association continued to be held at the Health Clinic, Hudson Road, Leasowe, each Wednesday evening from 7.0 p.m. to 8.0 p.m.

During the year 345 patients (including 102 new patients) attended.

In addition, over 300 Wallasey residents attended the clinic held at 11a Oxton Road, Birkenhead. Twenty of those attending the Leasowe Clinic did so pre-maritally.

203 cervical smears were taken at the Leasowe Clinic by the medical staff of the Family Planning Association during the year.

Priority Dental Services

The dental service for expectant and nursing mothers and children under 5 years of age continued to be available from the four dental clinics in the borough.

Approximately one eighth of the time of the Chief Dental Officer and of four dental officers (two of which are employed on a part time basis) continued to be allocated to this service.

The following are details of the treatments given:-

A. Number of Visits for Treatment During Year

	Children 0-4 (incl).	Expectant and Nursing Mothers
First Visit	141	27
Subsequent Visits	48	34
Total Visits	189	61
Number of Additional Courses of Treatment other than the First Course commenced during year	10	-
Treatment provided during the year - Number of Fillings	88	10
Teeth Filled	76	10
Teeth Extracted	231	77
General Anaesthetics given	127	10
Emergency Visits By Patients	78	1
Patients X-Rayed	7	3
Patients Treated by Scaling and/or Removal of Stains from the teeth (prophylaxis)	1	5
Teeth Otherwise Conserved	13	-
Teeth Root Filled	-	-
Inlays	-	-
Crowns	-	-
Number of Courses of Treatment Completed during the Year	92	11

B. Prosthetics

Patients Supplied with F.U. or F.L. (First Time)	2
Patients Supplied with Other Dentures	3
Number of Dentures Supplied	8

C. Anaesthetics

General Anaesthetics Administered by Dental Officers	29

D. Inspections

	Children 0-4 (incl.)	Expectant and Nursing Mothers
Number of Patients given First Inspections During Year	280	24
Number of Patients who required Treatment	114	23
Number of Patients who were Offered Treatment	114	23

E. Sessions

Number of Dental Officer Sessions (i.e. Equivalent Complete Half Days) Devoted to Maternity and Child Welfare Patients:

For Treatment	50
For Health Education	-

Day Nurseries

Dr. E. Grant, who attends on a "sessional" basis reports as follows:-

Although I am only a "part-timer" now, I am very pleased to have been allowed to retain my association with our three day nurseries as such establishments for the "under 5's" have been of great interest to me, since their inception as war time day nurseries in 1940.

There is no doubt that the demand for nursery places throughout the country far exceeds the supply, with Wallasey being no exception, and it is becoming increasingly difficult to admit all those who wish to be accommodated,

It is to be hoped that eventually day nurseries will fall into line with nursery classes, and will be free of charge. If this were to happen it would relieve our three matrons of their weekly headaches when they collect the differing fees from the mothers - differing because an assessment is made according to income and expenditure, if the parent appeals for a reduction - thus, at present, the fee may range from nil up to a maximum of 14/6d. per day.

The nursery attendance figures do not always prove my point that there is a great demand for places, but when dealing with children under the age of five years, there is always bound to be a very high absentee rate due to epidemics of infectious diseases and various other social factors, so that, although the number on the register is kept at a fairly high level, the average figure for attendance can be very low, especially in the winter.

Admission is still based on the social need of the family, or the unsupported mother and thus the large majority of children in a day nursery come from backgrounds which have environmental, physical or personal difficulties, and because of this, such children are offered minimal opportunities for good relationships, or experience in play and language development. Thus, these deprived children, more than most, need a warm, stable, friendly atmosphere within the happy environment of the nursery under the guidance of our matrons and staff, who understand and appreciate their emotional, social and physical needs.

We are able to find occasional places in the nurseries for some maladjusted or sub-normal children, and this gives me a very good opportunity of assessing such children before they reach school age and referring them, if necessary, to the Child Guidance Clinic for the expert opinion of the psychiatrist and educational psychologist, thus ensuring that the correct form of education is chosen for them without delay.

I hope that when the various reports such as "Plowden", "Yudkin" and "Seebohm" are implemented, the old familiar image of the day nursery will not change too much.

Nursery nursing is still a very popular career for girls and there is no shortage of candidates from all over Wirral for the three student vacancies that are available in our two training nurseries each year.

It is interesting to note that in 1967, 2,139 candidates entered for the Examination of the National Nursery Examination Board, and 1,993 passed - i.e. 93% and nearly 90% of these had been trained in local authority nurseries.

The Plowden Report in its recommendations concerning nursery education, envisages the need for training even more nursery assistants. I hope, therefore, that when Eastway Day Nursery is eventally replaced by a new, modern, purpose-built 50 place establishment, that it, too will become a training nursery, thereby enabling us to train more nursery nurses for the expected increase in the number of day nurseries.

Details of attendances during the year are as follows:-

Nursery	Number on Register 31/12/68	Number of Places	Average Daily Attendance
Eastway	34	30	26.5
Central Park	52	50	41.7
Oakdale	42	50	34.2

Care of Unmarried Mothers and their Children

No Mother and Baby Home is provided within the Borough, but full use is made of the services available through voluntary organisations.

Most of the cases are dealt with initially by the Wallasey Moral Welfare Association whose official worker advises the expectant mother on the social aspects of her problem and arranges, where necessary, for her admission to a suitable home.

During the year the Council granted financial assistance in ten cases. These were admitted to homes as follows:—

Sacred Heart Home, Brettargh Holt, Kendal	1
St. Teresa's Home, Salford	4
St. Monica's Home, Liverpool	2
St. Bridget's Home, Chester	1
Chaddeslode Mother & Baby Home, Shrewsbury	2

The mothers were in the following age groups:— 17yrs (3); 18yrs (3); 19yrs (1); 20yrs (1); 28yrs (1); 33yrs (1);

In the previous year financial assistance was given in eleven cases.

Nurseries & Child Minders Regulation Act, 1948

During the year the above Act was amended by the Health Services & Public Health Act, 1968. As from 1st November 1968 all premises in which children are received for a total of two hours or more in the day must be registered with the Local Authority.

In addition, persons, who in their own homes and for reward, look after one of more children under the age of 5 years to whom they are not related, must register if the child/children are received for a total of 2 hours or more in the day.

Non-compliance with these provisions render offenders liable to a penalty of £50 for the first offence and for a subsequent offence, imprisonment up to 3 months, a fine not exceeding £100 or both.

Towards the end of the year there was therefore an appreciable increase in the number of applications for registration. At 31st December 1968 there were six day nurseries and four daily minders registered with the Authority, caring for up to a maximum of 155 and 42 children respectively.

A comprehensive register gives details of accommodation; names & qualifications of staff; equipment of premises; arrangements for feeding; infectious disease precautions, etc.

Prior to a recommendation being made to the Council that premises be registered as a day nursery or a person as a daily minder, a visit is made by the Superintendent Health Visitor to ensure that the proposed arrangements are satisfactory and a report is made to the Medical Officer of Health who personally visits the premises. In addition, a public health inspector visits, if necessary, to ensure that the premises and sanitary arrangements and facilities for the preparation and storage of food are satisfactory, and that the size of the premises is adequate for the number of children it is proposed to accommodate. The Chief Fire Officer also visits regarding necessary fire precautions and the Town Planning Section of the Borough Engineer's Department is advised of details of the application for registration.

SECTION 23 - MIDWIFERY SERVICES

Domiciliary Midwifery

The Medical Officer of Health continued to act as Medical Supervisor throughout the year. Staff meetings

were held approximately once a month and were attended by the Medical Supervisor and the Superintendent Health Visitor.

Mrs. J.M.Norris was appointed to the vacancy created by the retirement of Mrs. A.B.Timewell in December, 1967 and took up her appointment in January 1968.

Two members of the staff attended refresher courses in 1968.

The number of domicilary confinements showed a further decline - 74 as compared with 102 in 1967. The number of women delivered in hospital and other institutions, but discharged and attended by domiciliary midwives before the tenth day rose from 1,195 to 1,209.

An order for five "Entonox" machines was placed before the end of the year so that each midwife will be equipped with a set. These, as in the case of the old gas and air machines will be serviced at the ambulance headquarters.

Arrangements were made for the staff to have a demonstration of the new equipment and they were instructed in the storage of the new cylinders.

Number of Deliveries by Domiciliary Midwives in the Area During the Year

Cases			Number of Women Delivered in Hospitals and Other Institutions but Discharged and Attended by Domicillary Midwives before the 10th day
Doctor Not Booked	Doctor Booked	Total	
1	73	74	1,209

Maternity Outfits

On application to the midwife in attendance or to the Public Health Department, maternity outfits are supplied free of charge for all domiciliary confinements.

The number of maternity outfits issued during the year was 141.

Maternity Homes

There are no private maternity homes registered in the borough.

SECTION 24—HEALTH VISITING

Mrs. K. Schofield Superintendent Health Visitor, makes the following observations:—

Care of the Elderly

During 1968 the number of visits to the elderly increased. In 1967, there were 446 cases and 996 visits, compared with 552 cases and 1,248 visits this year.

A health visitor attends Mill Lane Geriatric Unit each Thursday morning to discuss the probable social and medical needs of the elderly patient on discharge from hospital. The Medical Social Worker also takes part in the discussion and this liaison forms a valuable link between the hospital and the home.

On discharge from hospital, an elderly patient is visited, if necessary, and any "after-care" is arranged by the health visitor.

General practitioners also request supervisory visits. The elderly person is kept under surveillance and the family doctor is called in only if and when there is a medical need. Despite the acute shortage of staff, an elderly person is not neglected when a request is made by the family doctor.

When an elderly person can no longer cope at home and relatives are unwilling or unable to manage, then the health visitor will refer the case to the Welfare Department. There does arise a certain amount of over-lapping of work between us and the welfare officers, but an effort is made to avoid this whenever possible.

Health Visitor/G.P. Liaison Scheme

This year a further scheme of this nature started with another Group Practice. A health visitor attends the surgeries several times a week to meet the doctors and discuss any medical or social problems the doctors may have amongst their patients.

Co-operation between our department and the general practitioner service must benefit the community about which we are both concerned. It is still important, however, to remember that a health visitor is trained in prevention of disease and not the curative aspect, so that she must at all times concentrate on positive mental and physical health, rather than becoming too involved with people who are in need of medical care and attention.

There are now four members of staff who work in co-operation with the general practitioner. Two visit Group Practices and two attend at the surgeries of two general practitioners in the borough. The health visitors express their appreciation of this contact and consider it a worthwhile scheme.

Family Planning

This is another facet of the health visitor's work in which she is becoming more involved.

In this enlightened society, young people are anxious for advice as they wish to limit or space their family.

After completion of the alteration of the Family Planning Association's premises in Oxton Road, Birkenhead the staff were invited to view the clinic. After a tour of the premises, a lady doctor talked to us about birth control and the modern methods which are used. It was an interesting and worthwhile visit whereby the knowledge acquired can be applied in a health visitor's everyday work.

Cytology Service

The health visitors contribute considerably to the success of the scheme. So far there has always been a waiting list of women wishing to take advantage of this service. The staff, being in contact with a large cross-section of the community, meeting women in their homes, in child health clinics and at school medical inspection sessions, never miss an opportunity to advise women to have this cancer prevention test.

Over the years. the introduction of this service has meant an increase in home visits for the staff. For example, a woman may fail to attend her general practitioner for referral to a gynaecologist, or she may need a repeat smear or treatment for an infection. The health visitors attempt to visit these women and advise accordingly. Each case, if possible, is, therefore, carried to a final satisfactory conclusion.

Home Visiting

This aspect of our work is still of paramount importance. It is regretted that, owing to staff vacancies and also the demands on the time of the staff as indicated in the preceding paragraphs it was not possible during the year to carry out as many routine visits as could be desired.

I wish to thank the health visiting staff for their loyalty to me during the past twelve months.

Also I thank the Health Committee for allowing a member of staff to attend a Refresher Course.

The following is a summary of work done during the year:—

Health Visitors	Cases	Visits
1. Total (Excluding ineffective visits)	11,023	23,087
2. Children born in 1968.	1,661	5,168
3. Children born in 1967	1,869	4,213
4. Children born in 1963 - 66	4,160	8,898
5. Total number of children in lines 2 - 4	7,690	18,279
6. Persons aged 65 or over	552	1,248
7. Number included in line 6 who were visited at the special request of a G.P. or hospital	269	382
8. Mentally disordered persons	66	128
9. Number included in line 8 who were visited at the special request of a G.P. or hospital	13	24
10. Persons, excluding Maternity cases, discharged from hospital (other than mental hospitals)	124	144
11. Number included in line 10 who were visited at the special request of a G.P. or hospital	82	93
12. Number of tuberculous households visited	19	21
13. Number of households visited on account of other infectious diseases	887	1,100
14. Other cases	1,685	2,167
15. Ineffective visits	3,397	3,596

Tuberculosis Visitors

	Cases	Visits
16. Tuberculous households visited	317	1,266
17. Households (other chest conditions)	107	536
18. Visits to T.B. contacts and suspects	-	253
19. Other visits	-	315
20. Ineffective visits	-	392

SECTION 25 - HOME NURSING

Mrs. K. Elson, Superintendent of the District Nursing Service reports as follows:—

"1968 was a busy year initially and continued at a steady pace. Fewer patients were nursed but more visits made. The service, with the exception of the bath attendant section, was fully staffed except for a few months in the year.

Changes are taking place in the nursing field and in April an "Organisation and Method" Study was undertaken for two weeks. This resulted in the employment of one Enrolled Nurse to replace a Queens Nurse who had resigned to go to Canada.

July saw the end of the Queens Institute as a parent body for District Nurses. Training is now under the guidance of the Ministry of Health. A national written examination has been agreed upon but the practical examination is no longer obligatory and can be replaced by an oral examination or written report. Wallasey is continuing with the practical examination for the time being as I think it is essential to the type of work we are doing. Two nurses have just completed this course, making every full time S.R.N. on the staff district trained. In-Service training is being given to the two enrolled nurses as there is no training centre at the present time within easy reach.

The Group Practice at Perrin Road with five doctors in attendance opened in July, and although slow to start has now proved very beneficial to all concerned. A nurse allocated to the group practice visits all patients who have treatment ordered by their doctor unless they are resident in Leasowe or Moreton, when a nurse operating in that area visits. The nurse is in attendance each day for two hours to carry out treatments in the surgery. This has resulted in a slight reducation of home visits and there is a more rapid discharge of patients. It is to be hoped that this is the start of many such practices.

I should like to thank all members of the Health Department, the general practitioners and hospitals for their assistance. Without their assistance our work would be a lot more difficult.

Nine students from Victoria Central Hospital spent a day on the district, and thirteen hospital and public health students from the William Rathbone College in Liverpool spent an afternoon at the District Nursing Centre. Much is gained by both the students and the Local Authority staff from these visits.

Below is a summary of all work undertaken during the year. It was interesting to note that on 31st December, 1968, out of 490 patients carried forward to 1969, 381 of these were over the age of 65 years".

	Cases	Visits
Medical	1,467	50,183
Surgical	317	9,752
Tuberculosis	16	727
Infectious	4	26
Maternity Complications	2	14
Others	8	15
	1,814	60,717
Included in above		
65 years and over	1,203	41,069
5 years and under	10	499
More than 24 visits	610	47,982
Injections	576	14,906
Baths by Auxillaries	204	4,998
Late visits	23	356
Night nursing	5	10 nights
Visits to Doctors etc. (Not in above figures)		237

Perrin Road. Group Practice (6 months)

Number of patients attending for treatment	126
Number of treatments given	445
Patients nursed at home	117
Home visits (included in Centre Statistics)	2,295

Nursing Homes

There were four Nursing Homes on the Register at the end of 1968. There were no applications for registration or cancellations throughout the year. 41 deaths occured in the Homes during the year.

Fourteen visits were paid to the Nursing Homes by the Superintendent Health Visitor.

SECTION 26 — VACCINATION AND IMMUNISATION

General

The important work under this section was continued throughout the year by the Department and was again greatly assisted by the General Practitioners in the Borough.

The importance of vaccination and immunisation cannot be over emphasised.

Poliomyelitis

A total of 1,368 persons under 16 years of age completed a primary course of vaccination and 1,298 persons under 16 years of age received reinforcing doses during the year.

The comparable figures for 1967 were, primary 1,542, reinforcing 1,173. Details, by age group, are as follows:-

Primary Courses

Type of Vaccine or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Salk	-	-	-	-	-	-	-
Sabin	264	790	126	53	94	41	1368
Totals	264	790	126	53	94	41	1368

Reinforcing Doses

Type of Vaccine or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Salk	-	-	-	-	1	2	3
Sabin	-	17	97	24	1014	143	1295
Totals	-	17	97	24	1015	145	1298

Diphtheria Immunisation

A total of 1,432 persons under 16 years of age completed a primary course of vaccination and 1,976 persons under 16 years of age received reinforcing doses during the year.

The comparable figures for 1967 were, primary 1,577, reinforcing 1,682. Details, by age group, are as follows:-

Primary Courses

Type of Vaccine or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Triple D.T.P.	377	741	90	31	41	6	1286
Diphth/Pertussis	-	-	-	-	1	-	1
Diphth./Tetanus	4	7	8	17	62	25	123
Diphtheria	19	2	1	-	-	-	22
Totals	400	750	99	48	104	31	1432

Reinforcing Doses

Type of Vaccine or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Triple D.T.P.	2	63	206	50	380	69	770
Diphth./Pertussis	-	-	-	-	-	-	-
Diphth./Tetanus	-	9	27	18	611	499	1164
Diphtheria	1	9	14	1	16	1	42
Totals	3	81	247	69	1007	569	1976

Whooping Cough

A total of 1,287 persons under 16 years of age completed a primary course of vaccination and 770 persons under 16 years of age received reinforcing doses during the year.

The comparable figures for 1967 were, primary 1,489, reinforcing 772. Details, by age group, are as follows:-

Primary Courses

Type of Vaccine or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Triple D.T.P.	377	741	90	31	41	6	1286
Diphth./Pertussis	-	-	-	-	1	-	1
Pertussis	-	-	-	-	-	-	-
Totals	377	741	90	31	42	6	1287

Reinforcing Doses

Type of Vaccine or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Triple D.T.P.	2	63	206	50	380	69	770
Diphth./Pertussis	-	-	-	-	-	-	-
Pertussis	-	-	-	-	-	-	-
Totals	2	63	206	50	380	69	770

Tetanus

A total of 1,442 persons under 16 years of age completed a primary course of vaccination and 1,960 persons under 16 years of age received reinforcing doses during the year.

The comparable figures for 1967 were, primary 1,595 reinforcing 1,677. Details, by age group, are as follows:-

Primary Courses

Type of Vaccination or dose	Year of Birth					Others under age 16	Total
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Triple D.T.P.	377	741	90	31	41	6	1286
Diphth./Tetanus	4	7	8	17	62	25	123
Tetanus	-	1	-	-	2	30	33
Totals	381	749	98	48	105	61	1442

Reinforcing Doses

Type of Vaccine or dose	Year of Birth					Others under age 16	Tota
	1968	1967	1966	1965	1961-64		
Quadruple D.T.P.P.	-	-	-	-	-	-	-
Triple D.T.P.	2	63	206	50	380	69	77
Diphth./Tetanus	-	9	27	18	611	499	1164
Tetanus	-	1	-	-	6	19	26
Totals	2	73	233	68	997	587	1960

Smallpox Vaccination

A total of 708 persons under 16 years of age were vaccinated and 96 p sons under 16 years of age were revaccinated during the year.

The comparable figures for 1967 were, vaccinations 883, revaccinati 115. Details, by age group, are as follows:-

Age at date of vaccination	Number of Persons vaccinated or revaccinated		Number of cases specially repo		
	Vaccinated	Revaccinated	(a) Generalised vaccinia	(b) Post-Vaccinal Encephalomyelitis	Death from complicati of vaccina other tha (a) and (b)
0-3 months	6	-	-	-	-
3-6 months	14	-	-	-	-
6-9 months	12	-	-	-	-
9-12 months	38	-	-	-	-
1 year	333	4	-	-	-
2-4 years	209	7	-	-	-
5-15 years	96	85	-	-	-
Totals	708	96	-	-	-

Measles

Measles vaccine became available during the year and 340 children under the age of 16 received immunising doses. Details by age group are as follows:-

Year of Birth					Others under age 16	Total
1968	1967	1966	1965	1961-64		
2	57	33	93	149	6	340

SECTION 27 - AMBULANCE SERVICE

There was no change in the administration of the service in Wallasey, which has had a joint Fire and Ambulance Service since the implementation of the National Health Service Act in 1948. The day-to-day administration of the service continued to be carried out by the Chief Fire and Ambulance Officer.

The following are details of the staff establishment:-

1 Station Officer (Hospital Transport Officer.)
2 Sub-Officers.
7 Leading Drivers.
32 Drivers.

42 Total

The demands upon the Ambulance Service continue to grow. Operational calls totalled 49,492, in 1968 as against 48,211 in 1967. Top priority calls alone averaged 23 per day.

The vehicle mileage, however, shows a decrease from 183,828 miles in 1967 to 180,728 miles in 1968.

The table on Page 49 gives details of the cases conveyed, etc., during the year.

The department is fortunate in having the services of a Hospital Transport Officer, a joint appointment between the Local Authority and the Hospital Management Committee. This Officer is based at Victoria Central Hospital and in his capacity as liaison officer endeavours to effect the efficient deployment of Ambulance Vehicles and manpower. Some 17,000 patient-journeys have been dealt with in this manner and Mr. Buschenfeld the Chief Fire and Ambulance Officer reports that this co-operation has had a marked effect on the relationship between the public and the Ambulance Service.

The following details are an extract from Mr. E.E. Buschenfeld's report:-

Details of Training Courses Attended

Ambulance Training School, Wrenbury Hall	22
Qualified and/or re-qualified - First Aid Certificates	5
Obtained Associates examination of the Institute of Certified Ambulance Personnel.	1

Lectures

During the year 19 lectures were delivered to outside organisations, providing instruction to 518 persons on Mouth to Mouth Resuscitation.

Commendations

One ambulance driver received the commendation of the Liverpool Shipwreck & Humane Society and two officers received the Chief Fire Officer's Commendation.

AMBULANCE SERVICE—NUMBER OF CASES CONVEYED— 1968

	Jan.	Feb.	Mar.	Apr.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Street, Works & Domiciliary Accidents or Sudden Illness	218	198	220	236	228	337	266	288	219	215	195	227	2,847
Urgent Admissions	249	261	283	243	277	236	206	220	239	252	285	303	3,054
Malicious False Alarms	2	7	11	8	5	3	5	7	6	10	9	7	80
Mental Patients	27	17	22	18	15	17	297	324	386	515	326	185	2,149
Maternity Admissions	47	30	30	47	46	55	48	46	33	34	31	36	483
Infectious Diseases	32	36	40	31	26	20	32	21	43	46	48	33	408
Admissions booked in advance	74	74	68	70	75	57	65	57	55	61	83	61	800
Out-patients and Clinics	3,163	3,039	2,841	2,895	3,349	2,829	2,831	2,518	2,471	2,712	2,584	2,417	33,649
Gas & Air Sets & Midwives	2	2	-	-	2	-	-	-	-	-	-	-	6
Other Patients	401	354	543	457	626	442	623	205	482	672	513	380	5,698
Mortuary	19	7	8	7	6	7	3	8	11	10	14	12	112
Mutual Aid	7	16	21	27	29	17	12	19	20	17	14	7	206
Totals	4,241	4,041	4,087	4,039	4,684	4,020	4,388	3,713	3,965	4,544	4,102	3,668	49,492
Mileage	13,940	14,575	19,343	12,765	16,016	13,536	16,819	13,683	17,036	13,609	14,468	14,938	180,728

SECTION 28 - PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis

1968	1967	1966	1965	1964	1963	1962	1961	1960	1959	1958
40	34	39	29	32	39	43	50	78	84	77

No. of Primary Notifications.

Pulmonary	36 - 25 men 10 women 1 child
Non-pulmonary	4 - 1 man 2 women 1 child

Classification of Non-pulmonary cases.

1 Gland in neck 1 TB Colon 1 TB Uterus 1 TB Lumbar Spine.

Table of Primary Notifications.

	Notifications		Deaths		Death Rate
	Pul.	Non-Pul.	Pul.	Non-Pul.	per 1,000
1968	36	4	10	-	0.069

No. of Notified cases of Tuberculosis on Clinic Register.

1st January, 1968	955
31st December, 1968	823
Transfers from other areas	2
Lost sight of cases returned	-
New cases diagnosed during the year	40
Total visits by Health Visitors:-	2,591
TB cases	1,524
Others	1,067

Prevention.

No. of new contacts examined during 1968	505
No. of new cases diagnosed during 1968	40
Contact Rate	12.6
No. of new cases detected by contact examination	-
No. of cases detected by School contact examination	-
Home Nursing treated	16
Home Nursing total visits	727
B.C.G. Vaccinations	180
Children Mantoux positive at School	31
No. of contacts attending through above	102
No. of Mantoux positive children at School who attended the Clinic	35

Care

Families receiving clothing etc.,	27
Housing defects reported by Health Visitors	10
No. of patients receiving milk	3
No. of cases rehoused	1
Referred to the Education Department	1
Home Helps	6
Free School Meals	3
Meals on Wheels	4

I am grateful to Dr. J.Baxter, Consultant Chest Physician, for the following observations:—

There has been a rise of 6 in the notification of tuberculous cases this year to 40. None of these cases were immigrants. This figure is rather disappointing but should not give cause for alarm, as there was a drop from 5 to 2 in the number of children diagnosed, and only 3 cases in the 15 to 20 age group. This shows that the giving of B.C.G. is still effective and worth while, even though one of this age group had been given B.C.G. - the other 3 were unprotected.

As usual the bulk of cases came from the over 45 - a total of 24. Two of them were notified after death and one was 85 years of age. It is interesting that 20 of this group were males, making one think that most old men are not capable of caring for themselves as well as old ladies, and suffer accordingly. With this rise in cases it is obvious that the combined efforts of the School Medical Service in giving B.C.G. and the Chest Clinic in checking Mantoux positive cases detected in School as well as other families, must be continued at its present high level. Also if older men, particularly those living alone, could be encouraged by General Practitioners and Health Visitors to come for X-ray, we might cut down this hidden reservoir of infection. It is obvious that the 20 males over 45 detected are only the tip of the iceberg.

A further rise in the visits by Health Visitors to 2,591 is noted. These friendly visits are greatly appreciated by tuberculous and other cases, and many social problems are ironed out, while lonely patients and worried relatives are helped. The weekly visits to Wallasey patients in Cleaver and other hospitals are greatly appreciated and the Visitors are regarded as friends.

The Home Nursing Service have made 727 visits this year - an increase of 180 on 1967. More tuberculous cases have been treated at home, thus reducing costs and relieving pressure on much needed hospital beds. The patients speak of this Service in glowing terms and

look forward to the visits, even if part of the time is taken up by injections. The sympathy, kindness and cheerful conversation helps as much as the medical treatment.

The important section of prevention has functioned more intensely this year, a total of 505 contacts being examined - giving the highest contact rate (12.6) ever recorded. Even though no new cases were detected by this work it is still well worth while because 180 children contacts were given B.C.G. 35 children found Mantoux positive at School attended the Clinic and also 102 of their contacts. 31 children were from Wallasey Schools and 4 from Schools outside Wallasey who are domiciled in Wallasey. Two of these children were treated for tuberculosis as a precaution because of a very strongly positive Mantoux Test. This is an indication for preventive chemotherapy.

Our gratitude and that of our patients is again due to the Home Help and Meals on Wheels Services. Without them, many of our patients would be hungry and miss the cheerful, helpful visits and conversation.

Vaccination of School Children with B.C.G. Vaccine

This is an important measure in the campaign to eradicate tuberculosis from the community and is carried out on school premises, so avoiding time wasting visits to clinics. The scheme has been in operation in Wallasey since 1953. In that year were 29 cases of pulmonary tuberculosis newly notified in the age group to be protected by vaccination, whereas in 1967 only 3 cases were notified in this age group, despite an overall rise in the total number of new cases notified in all age groups in that year. Thus it can be seen that this preventive measure is proving its effectiveness. The parents of children who have reached the age of 12+ years were sent information concerning the purpose of the vaccination and asked to complete a consent form if they wished their children to be vaccinated. Prior to vaccination each child is given a skin test known as a Mantoux Test to determine whether he is already sensitised to the tubercle bacillus. Only those who show no reaction to the skin test are vaccinated Those who show a positive reaction are referred with their family contacts to the Chest Clinic to exclude tuberculosis, as the fact that they reacted to the skin test could mean that they had become infected with the tubercle bacillus and the most likely source of infection would be members of their own family. As you see from the Table at the beginning of this section, 31 children and 102 contacts of these children were referred to the Chest Clinic during the year and one child was found to be suffering from pulmonary tuberculosis, who had

been given B.C.G. previously. This scheme is therefore not only useful in preventing tuberculosis but serves as a case finding procedure.

Details of the number of children tested and vaccinated are given in the Table which follows:—

Primary Mantoux Tests and Vaccination

School Children

No. of children offered (per parents) B.C.G. Vaccination	1,618
No. of children accepting (per parents) B.C.G. Vaccination	1,217
No. of children Mantoux Tested	1,212
No. of children found Mantoux Positive ...	31
Percentage of children Mantoux Positive	2.5%
No. of children found Mantoux Negative ...	1,181
No. of children vaccinated with B.C.G. Vaccine	1,143

Re-examinations

No. of children Mantoux Retested	98
No. of children found Negative	28
No. of children re-vaccinated with B.C.G. Vaccine	28

Provision of Nursing Equipment

In 1968 a total of 964 articles were issued as follows:

Air Rings	46	Enuresis Machine	25
Alternating Pressure Pad Unit	3	Invalid Chairs	134
Back Rests	122	Knee Cages	54
Bed Boards	5	Linco Auditory Trainer	1
Bed Blocks	8	Mackintosh Sheets	104
Bed Pans	128	Oxford Hoists	2
Bed Tables	6	Self Lifting Poles	8
Bed with Self Lifting Pole	1	Special Bedstead	7
Commodes	176	Tripod Sticks	34
Crutches	4	Urinals	59
Dunlopillo Mattresses	6	Zimmer Walking Aids	31

All items of nursing equipment are issued free on loan.

This service, which facilitates the nursing of patients in their own homes, is much appreciated by relatives.

The smaller items of equipment can be collected from the Health Department in the South Annexe to the Town Hall, whilst arrangements are made for delivery in necessitous cases. Larger and heavier items are delivered by departmental van to the patients' homes.

Clean Linen Service for the Incontinent Chronic Sick

This service continues to prove invaluable in the nursing of patients in their own homes, and is much appreciated by patients and relatives.

The provision of clean draw sheets, rather than incontinence pads, is preferable in that no problem of disposal arises. The latter would create a very real problem, particularly in the smoke control areas of the borough.

The scheme is available to all persons requiring it, and all cases are investigated by the Superintendent of the District Nursing Service.

Fourteen sheets are left initially for each patient and replaced with clean as necessary - usually twice weekly.

The number of sheets issued during the year totalled 26,832 to 141 cases. Comparable figures for 1967 were 27,318 and 165 respectively.

In addition a clean nightdress service is available to all necessitous cases. 150 nightdresses were issued during the year.

Health Education

The health education activities in the Borough are organised by Dr. J. Fergusson, who holds the joint appointment of Health Education Officer with Birkenhead and Wallasey. A summary of his activities in Wallasey during the year is given below:—

1. School Lectures: Lectures and films on dental hygiene have been shown to Somerville Junior, Barnston Lane Junior, Liscard Junior, Riverside Junior, Moreton R.C., Moreton C.E., St. Alban's R.C., St. Joseph's R.C., Our Lady of Lourdes R.C., and New Brighton Junior Schools. This method is expensive in man hours, however, and, to promote health education in the town in a less time consuming way, insertions have been placed in the schools' weekly Bulletins informing teachers of the facilities available from the Health Education Department. In this way requests have been met for posters, leaflets, films, film strips and, if necessary, apparatus. If specially requested the Health Education Officer will supply the outline of part of the lecture which concerns health education or give a lecture himself. Many such requests are now being received and met.

2. College of Further Education Lectures: These are also taking too much of the Health Education Officer's time,

as his terms of employment are that he spends two days each week in Wallasey and three days each week in Birkenhead, and so from next year they will be reduced to two sessions per week. These lectures include a visit to an outside source of knowledge, e.g. School of Hygiene, Liverpool, Radiotherapy Department, Clatterbridge Hospital, by coach. The coach is paid for by the students.

3. Cancer Education Lectures: The majority of these are organised in conjunction with the Merseyside Cancer Education Committee. It is usual for the lectures to be followed by question and discussion; literature is also distributed.

4. Outside Lectures: Scouts, Youth Clubs, Women's Clubs, etc. These are by request and include such subjects as First Aid, Smoking, Reproduction, Venereal Disease, working of the health service, health in retirement and are usually illustrated by a film or film strip.

5. In-Service Lectures: These are usually to health visitors and midwives, but may include medical staff. The lectures have included "Depression in General Practice", "Patterns of Sleep", "Examining the Newborn" and "To Janet a Son".

6. Campaigns & Projects: These are promoted locally, as for example the one dealing with "The Accidental Poisoning of Children" or by the Department of Health and Social Security, e.g. the drive to promote measles immunisation. There have been many requests for help from the Health Education Section from nurses, schoolchildren doing projects, student health visitors and doctors doing the D.P.H. Course. There has been general satisfaction expressed with the assistance provided.

Firms, stores, factories and hotels have been visited by the Health Education Officer with a view to arranging the showing of a film strip on breast self-examination to the female staff. This has been enthusiastically welcomed by virtually 100% of the local business concerns. Another film strip on cervical cytology (smear test for cancer) is being prepared and will be used in the same way.

Working on a strictly limited budget means the section is very hampered both by lack of apparatus and personnel. However, many pieces of apparatus have been constructed on the premises and at home so the section now has two exhibition screens, a back projection unit and many illustrated diagrams for exhibition purposes.

Much help was given by Mr. R. Hughes, Senior Public Health Inspector.

A new anti-smoking film for Juniors "Dying for a Smoke" was bought.

7. Publicity: Great use has been made of Radio Merseyside who are always most helpful. Five broadcasts have been made. The press have also been most co-operative and the press articles, often with illustrations, have cost the section nothing.

The Health Education Officer would like to express his sincere thanks to the Standing Conference of Women's Organisations for their help in publicising the various campaigns. He would like to thank the Wallasey School of Art who supplied a large number of tastefully designed posters, either at purely nominal cost, or sometimes free, for the campaign against "Poisoning of Children".

With the best will in the world Health Education cannot be made to shoulder the whole responsibility of the nation's health. We can only advise. Some positive action must be taken by the public themselves.

Cytology Clinics for the Early Diagnosis of Carcinoma of the Cervix Uteri.

Dr. E. I. Grant, who conducts clinics on a sessional basis reports as follows:—

As we approach the third year in the life of our cervical cytology clinics we have I think, reason to be modestly satisfied with our endeavours and results.

There can be no doubt that the incidence of invasive carcinoma of the cervix uteri can be reduced by the early detection and treatment of carcinoma-in-situ; in simpler terms this means that by the screening test cancer cells can be detected before they have invaded the surrounding tissues, and can, therefore, be removed by simple surgical treatment before any lasting damage has been done.

Apart from the positive or suspicious cases of cancer that have been found, other gynaecological conditions have been diagnosed and referred for appropriate treatment, and as a result of this, we have a number of grateful patients to our credit.

Our waiting list of applicants for this test is held within reasonable limits, about four weeks being the average time which elapses between application and appointment. Forms of application are available at all

our clinics, and health visitors carry them with them on their visits to the homes. It is on these occasions that they do their best to encourage those women who are at greatest risk to attend the clinic for a screening test - i.e. those from Social Classes IV and V.

The evidence of correlation with social class suggests that a poor standard of personal hygiene might well be a contributory factor in the aetiology of cervical cancer, and, therefore, of considerable interest to workers in the Public Health Department, whose teaching of health education in the hygiene of sex organs may well play a significant role in the reduction of this malignant disease, particulary among the lower social classes.

Because of the possibility of cytological changes in the cervix in women who are regulary taking contraceptive pills, many general practitioners are now requesting that these patients attend for a smear at the clinic before prescribing the pill, and at regular intervals thereafter.

By the end of 1968 we had done about 1700 cervical smears and, in 1969, we shall have to consider recalling out 1966 cases for repeat smears. This will, of course, involve a lot of extra work both clinical and clerical, as we shall have two lists from which to draw - the old ones and the new. Three to five years is generally regarded as a safe and suitable time interval between negative smears, unless an earlier one has been requested by the pathologist, and priority may have to be given to those who are making their first application for the test.

The total number of women who attended for examination during the year was-their ages being as follows:—

Ages.	
20 - 29 (who attended by special arrangement)	52
30 - 39	316
40 - 49	235
50 - 59	79
60 - 65	8
Total women attending	690

In one case the result of the smear was "suspicious" and this case was referred for further investigation. A further five cases were found to be positive.

In ninety-five cases it was necessary to take repeat smears. The following is an analysis of the report of the pathologist at Victoria Central Hospital:—

Specimen unsatisfactory	14
Normal cells	507
Inflammatory changes	168
Trichomonas vaginalis	27
Monilia	8
Other conditions	-
Total smears	724

The above summary includes thirty-two cases in which two conditions were found, and one case in which three conditions were found.

In addition the Department is very grateful to the Family Planning Association for having taken 203 smears during the year.

Convalescence

Patients are sent for convalescence on the recommendation of the family doctor or hospital consultant. The financial circumstances of each applicant is considered by reference to an assessment scale laid down by the Council and contributions may be required from the patients towards the cost, according to their means.

During 1968 nine patients were accommodated in the undermentioned homes.

	Males	Females
Sutcliffe Rhodes Lodge, Birkdale	1	2
Lear Home of Recovery, West Kirby	-	4
Lady Forester Convalescent Home, Llandudno	1	-
Mary Bamber Convalescent Home, Colwyn Bay	-	1

In addition the cost of patients being admitted to suitable convalescent homes can be defrayed by a private fund, although it was not necessary to draw upon this fund during this year.

Venereal Disease

I regret to report a further appreciable increase in the incidence of venereal disease. During 1968, 309 Wallasey residents attended for treatment at centres outside the borough, as follows:

	Syphilis	Gonorrhoea	Other Conditions	Total
St.James Hospital Birkenhead:	1	62	150	213
Royal Infirmary, Liverpool:	1	4	16	21
Seamen's Dispensary & V.D.Clinic, Liverpool	2	15	54	71
Newsham General Hospital	-	-	4	4
	4	81	224	309

The total numbers attending in the previous foure years were as follows:

1964 203

1965 203

1966 191

1967 247

The majority of patients requiring treatment prefer to visit another area and consequently there is no treatment centre in this borough.

Details of the treatment centres continued to be displayed in the public conveniences.

Chiropody Service

The Chiropody Service continued to make a definite contribution to the care of the aged in the community.

The following are details of treatments given during the year:-

(a) Number of patients registered 1,834
(b) Number of treatments given:-
  (i) Old Age Pensioners 11,244
  (ii) Physically Handicapped persons 244
  (iii) Expectant Mothers ... ... -

11,488

Of these 10,760 were given at no charge to the beneficiary and 728 were given where the beneficiary paid 3/-.

There were 10 Chiropodists participating in the scheme at the end of the year, all of whom satisfied the conditions laid down in the Professions Supplementary to Medicines Act, 1960.

The patients can choose whichever Chiropodist he/she prefers and treatment is given in the Chiropodists' own surgeries or, if necessary, in the patients' homes. During the year 7,514 treatments were given at the surgeries and 3,974 treatments were given in the patients' homes.

The following are eligible for treatment in accordance with the Council's scheme:-

(a) Male persons who are over the age of 65 and female persons over the age of 60.
(b) Registered Physically Handicapped persons.
(c) Expectant Mothers.

The minimum interval between treatments in all but exceptional cases is 6 weeks and each patient is required to make re-application after having had 9 treatments.

No charge is made for the treatment to persons in receipt of a Supplementary Pension or Allowance from the Ministry of Social Security and all other applications are assessed in accordance with the scale approved by the Council and if accepted receive treatment free or at a reduced charge.

Fluoridation of Water Supplies

In September the Town Clerk reported the receipt of Ministry of Health Circular 24/68 to the Health Committee. This Circular urges all Local Authorities who have not already done so to adopt fluoridation at the earliest possible date. It was resolved by the Council that the contents of the Circular be noted.

The Council, had in 1962 previously passed a resolution in favour of such a measure, but unfortunately this decision has not yet been implemented, as the Wirral Water Board has stated that it would be impracticable to supply fluoridated water to any particular authority within the Board's area unless the other authorities to which they supply water are in agreement.

SECTION 29-DOMESTIC HELP SERVICE

Miss A. Elcock, Home Help Organiser reports as follows:-

The statistics for 1968 again prove as in previous years that the demand for Home Help Services is still on the increase and there seems no likelihood that this situation will alter in the future. It is even possible that, due to the economic pressures now being placed on the social services that future demand will outstrip the limited supply of help.

At present there are 500 cases on our books and an equivalent of 69 full time helpers to meet this case load. There is never any reserve of help, and emergencies have to be met by cancelling or postponing the help to less urgent cases. It is inevitable that staff sickness keeps the service from working at full strength at all times.

Once again, during the Summer months, students on vacation filled in the gaps created by staff holidays. After two years as an experiment this will now be a permanent measure in future.

During 1968, due to liaison with Wallasey Council of Social Service, many of the aged and housebound people on our case register have benefited from the activities of an organised group of young volunteers, who under the direction of their Organiser take on such chores as shopping, firelighting, coal carrying, simple house decorating etc, and though not in any way replacing the home help service provide a practical asset.

	Maternity	T.B.	O.A.P.	Others	Total
Applications received.	31	-	326	71	428
Applications accepted.	31	-	303	69	403
Applications refused	-	-	18	2	20
Accepted cases cancelled owing to private arrangements, deaths, etc.	1	-	66	10	77
No. of cases help sent	31	1	645	67	744
Cases commenced prior to 1968	1	1	403	8	413
Hours worked	1,226	220	115,575	9,881	126,902
No. of hours sickness & accident benefit	-	-	-	-	6,041
No. of hours holiday pay	-	-	-	-	10,164
				Total Hours ...	143,107

No. of helpers 31 Dec.1968 ... Full time 30) 69 full time
Part time 78) equivalent

SECTIONS 28 & 51 - MENTAL HEALTH SERVICE.

Once again this year proved to be a busy one for the department, although a comparison of statistics shows a drop in all aspects.

A great effort was made throughout the year to reduce the number of people admitted to hospital on a compulsory basis and the success of this exercise is easily seen when comparing the figures for this year with 1967, especially with regards to use of Sections 29 & 25 of the Mental Health Act, 1959. e.g. In 1967 the total number of Section 29 admissions was 37. This year there were only 13 such admissions.

It was thought that any reduction in the use of Section 29 may produce a corresponding rise in the number of Section 25 cases (two Medical Recommendations) but, in fact, the extra work done by the staff to avoid use of compulsory powers produced a slight decrease in these figures.

In 1967 total admissions using Section 25 were 71.
In 1968 " " " " " " 66.

To do this has meant that the staff of the department have actively implemented a policy of persuading the mentally ill to enter hospital on an informal basis. This has meant an increase in the time spent with each case which in turn has meant that less people in the community were seen and the number of visits made has also dropped.

It is gratifying to note that there was a decrease in referrals to the department purely for the sake of admission to hospital, although some doctors still see our roll as the same as our predecessors, the Duly Authorised Officers.

The figures shown for referral to the Local Health Authority show a marked drop this year and this is explained by the fact that the Ministry of Health statistics specifically excludes those referrals of people who are still under Local Authority supervision and also the cases which are referred for admission to hospital.

Staffing:

During the year a new Senior Mental Welfare Officer was appointed. The duties of the post were revised so that his time is spent wholly on mental health matters. Previously half of the time of this officer was allocated to welfare duties in accordance with the National Assistance Act, 1948.

In July one Mental Welfare Officer returned from the course at Mill Bank College, Liverpool, leading to the Certificate in Social Work, whilst in September a further officer was seconded on the course.

The trainee Mental Welfare/Social Welfare Officer resigned to take up a place on the course at Leeds University leading to the Diploma in Social Studies.

It was with regret that one officer, who had been with the department for a comparatively short period, resigned on account of ill health.

Summary:

The department has suffered the usual fluctuations in staff but has still managed to carry out its functions fairly well, although there must be cause for concern that we are not moving away from the "first aid" service, previously reported, into a social work orientated one.

Perhaps the forthcoming survey of the department, its work and its staffing by the Establishment Officer will indicate the moves to be made in this respect, especially in view of the recommendations of the "Seebohm Report".

Mentally Subnormal.

Statistics and records for the year ended 31.12.68 reveal or emphasise the following points:-

1 (a) Total number of subnormal and severely subnormal persons in the community on the Register at 31.12.68.

	Under 16 Years	16 years and over	
Male	33	55	= 88
Female	19	54	= 73
	52	109	= 161

In addition, a number of persons return home from institutions for holidays or on trial leave which necessitates visiting by the mental health officer with subsequent reports and supervision.

(b) New referrals during the year:-

	Under 16 Years	16 years and over	
Male	9	2	= 11
Female	5	2	= 7
	14	4	= 18

(c) Despite the removal from the Register of a number of those who have succeeded in holding employment and living more or less independent lives, it is no longer possible to visit all those on the register, even at 3 or 6 monthly intervals. Greater opportunity for participation and independence within a community setting inevitably brings problems and difficulties never previously encountered in the sheltered and somewhat inhibiting confines of a home atmosphere. In consequence, the increased pressure of work prevents mental welfare officers from giving families the supportive help and guidance which formerly was possible for the majority of cases. The excessively long intervals between visits does not permit of the cultivation of a mutually helpful relationship of understanding and trust and families are, therefore, deprived of the support they so badly need and value.

2. Institutional Care.

(a) Long-term care.
Admissions during 1968.

	Under 16 years	16 years and over	
Male	-	2	= 2
Female	1	2	= 3
	1	4	= 5

Details are as follows:-
2 males on Court Orders (Sec. 60. Mental Health Act, 1959)
1 female on Treatment Order (Sec. 26 " " " ")
2 females - informal admissions.

Awaiting admission to long term Institutional Care.

	Under 16 years	16 years and over	
Male	4	4	= 8
Female	1	2	= 3

Of these, three boys under 16 years were of extreme urgency and one male and one female over 16 years were fairly urgent. Six were not requiring accommodation at present, but institutional (or other supervised care) would inevitably be required at some time in the future.

It should be pointed out that in many instances institutional care is neither appropriate nor beneficial but in the absence of hostel or other suitable accommodation, no other arrangement can at present be made. The provision of the Adult Training Centre has tended to emphasise this gap in the services of the Local Authority.

There is a need for hostel accommodation for severely subnormal persons and this is included in the ten year Health and Welfare Development Plan of the Local Authority.

(b) Short-term care.
Admissions during 1968.

	Under 16 years	16 years and over
Male	3 (including readmissions)	4 (including readmissions)
Female	4 (" ")	5 (" ")

In addition, temporary care was sought for 5 boys under 16 years for whom no vacancies were available.

Temporary care is obtained (a) to provide relief during periods of family crisis or extreme stress (b) to enable the handicapped person and the relatives to have a spell away from each other for holiday or recuperation and (c) to accustom both to accept and adapt to spells of separation. To do this, use is made of hospital beds temporarily vacated by hospital residents on leave or holiday. The relief afforded to families is greatly appreciated.

Voluntary organisations, notably the National Society for Mentally Handicapped Children and the National Association for Mental Health provide for holidays for individuals and groups, both escorted and unescorted, also in some instances, for families too.

We are looking forward to the opening of the new Junior Training Centre in Moreton which will provide facilities for the more severely subnormal, some of whom have added physical handicaps.

Table 1

Mental Health Act, 1959.

	Male	Female	Total
Section 29 (Emergency Admission for Observation).			
St.Catherine's Hospital Annexe.	4	1	5
Moston	-	1	1
Deva	1	5	6
Winwick	1	-	1
	6	7	13
Section 25. (Admission for Observation).			
St.Catherine's Hospital Annexe.	10	19	29
Moston	-	3	3
Deva	3	29	32
Rainhill	-	1	1
Cheadle Royal	1	-	1
	14	52	66
Section 26. (Admission for Treatment).			
Deva	-	2	2
Rainhill	-	-	-
Greaves Hall	-	1	1
	-	3	3
Section 60. (Court Hospital Order).			
Deva	2	1	3
Greaves Hall	1	-	1
	3	1	4
Section 5. (Informal Admission).			
St.Catherine's Hospital Annexe.	39	49	88
Priory Day Hospital	4	15	19
Deva	23	39	62
Moston	14	33	47
Rainhill	1	-	1
Greaves Hall	8	5	13
Thingwall Hall	2	-	2
Ormskirk Childrens	1	-	1
Whitecross Homes, Warrington	-	1	1
	92	142	234
Total Admissions			
Informal	92	142	234
Compulsory	23	63	86
	115	205	320

MONTHLY STATISTICS 1968

	Number of Cases Admitted to Hospital			Number of Cases Visited			Number of Visits		
	Informal	Compulsory	TOTAL	Mentally Ill	Sub-Normal	TOTAL	Mentally Ill	Sub-Normal	TOTAL
JANUARY	28	9	37	131	19	150	272	39	311
FEBRUARY	17	5	22	124	32	156	239	40	279
MARCH	23	2	25	98	35	133	174	52	226
APRIL	20	5	25	104	40	144	208	61	269
MAY	22	8	30	121	46	167	222	76	298
JUNE	21	8	29	98	46	144	176	67	243
JULY	20	7	27	113	38	151	216	63	279
AUGUST	26	7	33	111	22	133	224	42	266
SEPTEMBER	13	8	21	40	12	52	133	17	150
OCTOBER	18	7	25	100	47	147	199	111	310
NOVEMBER	14	16	30	103	38	141	209	67	276
DECEMBER	12	4	16	106	21	127	225	50	275
TOTAL	234	86	320	-	-	-	2,497	685	3,182

NUMBER OF PATIENTS REFERRED TO LOCAL HEALTH AUTHORITY DURING YEAR ENDED 31st DECEMBER, 1968

Referred by	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total
	Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
(a) General practioners	-	-	10	19	-	-	-	-	-	-	-	-	-	-	-	-	29
(b) Hospitals, on discharge from in-patient treatment	-	-	19	44	-	-	-	-	-	-	-	-	-	-	-	-	63
(c) Hospitals, after or during out-patient or day treatment	1	1	8	26	-	-	1	-	-	-	-	-	-	-	-	-	37
(d) Local education authorities	-	-	-	-	-	-	-	-	-	-	-	-	3	1	-	-	4
(e) Police and courts	-	-	1	7	-	-	-	-	-	-	-	-	-	-	-	-	8
(f) Other sources	-	-	26	29	-	-	-	-	-	-	1	1	2	2	-	-	61
(g) Total	1	1	64	125	-	-	1	-	-	-	1	1	5	3	-	-	202

NUMBER OF PERSONS UNDER LOCAL HEALTH AUTHORITY CARE AT 31st DECEMBER, 1968

	Mentally Ill				Elderly mentally infirm		Psychopathic				Subnormal				Severely subnormal				Total
	Under age 16		16 and over				Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
1. Total number	1	-	42	86	7	7	-	-	3	1	2	1	18	31	31	18	37	23	308
2. Attending workshops, day centres, or training centres (including special units)	-	-	9	7	-	-	-	-	-	-	-	1	4	9	27	13	22	17	109
3. Awaiting entry to workshops, day centres, or training centres (including special units)	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	7	-	9
4. Receiving home training	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. Awaiting home training	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. Resident in L.A. home/hostel	1	-	10	13	-	-	-	-	-	-	-	-	1	-	-	-	-	-	25
7. Awaiting residence in L.A. home/hostel	-	-	-	-	4	-	-	-	-	-	-	-	4	3	2	-	7	2	22
8. Resident in other home/hostel	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9. Boarded out in private household	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10. Attending day hospital	-	-	-	15	3	2	-	-	-	-	-	-	-	-	-	-	-	-	20
11. Receiving home visits and not included in lines 2-10 (a) suitable to attend a training centre	-	-	18	29	-	5	-	-	-	-	2	-	5	5	-	1	4	5	74
(b) Other	-	-	14	32	-	-	-	-	3	1	-	-	-	1	2	2	2	1	58

Training Centres for the Sub-Normal and Severely Sub-Normal.

(a) Junior Training Centre

I am pleased to report that during the first few weeks of the year approval was obtained from the Ministry of Health for the erection of the much awaited new replacement Centre. Plans had already been prepared and it was, therefore, possible to commence building works before the end of March. It is anticipated that the Centre will be ready for occupancy in the spring of 1970.

The new Centre will provide 105 places for mentally sub-normal children and also a special care unit for 24 of the more severely handicapped.

As mentioned in last year's report, provision has been made for a domestic science room for the girls; a practical room for the boys where instruction will be given in woodwork, etc.; 7 classrooms and a main hall which in addition to providing dining facilities, will also be used for physical education and group activities as well as for the annual concert, pantomime, etc.

This is a joint project with Birkenhead County Borough and as at present, the costs will be apportioned between the two authorities relative to usage.

The new building is sited adjacent to the Adult Centre in Pasture Road, Moreton, and this will facilitate the transfer of the more senior trainees after preliminary visits.

The staff continued to comprise:—

Supervisor;
Senior Assistant Supervisor;
6 Assistant Supervisors;
1 Toiletting Assistant;
Domestic Staff.

In accordance with the policy of the Council, one Assistant Supervisor was seconded during the year to the one year course, held at the Harris College, Preston, leading to the Diploma for Teachers of the Mentally Handicapped.

The Deputy Medical Officer of Health continued to make monthly visits to the Centre to check on the health of the trainees attending.

Children continued to be conveyed to the Centre by special bus.

Miss I. P. Macdonald reports as follows regarding the activities carried out:—

The general routine of the centre has not altered during the last year, weather permitting we have continued with outdoor activities.

In March we commenced swimming lessons for the senior groups and we are fortunate to have two members of our teaching staff who are qualified swimming instructors. The children travel with their teachers by public transport to the baths and during the year they have gained confidence in travelling and in the water. We hope, in the near future, to increase the number of children attending. At present we are sending three per teacher.

Our Sports Day in June was very successful. Our Musical and Movement afternoon held in July was much enjoyed by the many parents and friends gathered in our Assembly Hall.

In December our hall was again at bulging point when over 130 parents and friends attended for our pantomime "Mother Goose".

The Record Player given by the Wirral Parents Association has been very useful and greatly appreciated by the children, especially on Friday afternoons for their own special 'pop' session."

(b) Adult Training Centre

Mr. F. Davies, Chief Training Officer, reports as follows:-

"The Training Centre opened in January 1965 and now provides 120 places for Sub-normal Adults from Wallasey and Birkenhead County Boroughs. (70 Birkenhead; 50 Wallasey).

The staff comprises:—

Chief Training Officer
Deputy Chief Training Officer
2 Senior Instructors
7 Instructors
1 part-time Clerk
1 Driver Handyman
Appropriate Domestic Staff.

The Deputy Chief Training Officer has returned from a one year course of training at the Harris College, Preston, leading to the Diploma for Teachers of the Mentally Handicapped.

The chief aim in 1968 has been to develop a broader concept of teaching and training so that the total person be considered, and to offer trainees new experiences, which could lead to a richer and fuller life, both at the Centre and within the community.

The morning "get-to-gether" at the refreshment bar, informative talks, the provision of daily newspapers, discussions on T.V., Radio and other topics have all become a vital part of the programme to help trainees to mature and grow into acceptable citizens.

The Camp was held again at Barnston Dale. It is quite likely that the trainees will go further afield in the not too distant future as a test of self confidence.

Our first Bazaar was held and was well attended. It was planned at short notice due to the land adjacent to the Centre being required in connection with excavations for the building of the new Junior Centre. Some 12 parents were asked to give of their support. Next year it is planned to invite as many parents as possible to contribute and give of their services to the Bazaar.

A Carol Concert was held early in December. The trainees took part in a Nativity play which was well attended by parents and friends.

The annual Parents Meeting was exceptionally well attended and a display of musical movement was given by a group of female trainees followed by a lecture on "Future Trends" in mental health by Dr. Nicholas, the Medical Officer of Health for Birkenhead.

A new range of progress rating reports is being designed so that it will be possible to give an up-to-the-minute report of trainees' activities to parents when they visit the Centre at the invitation of the Chief Training Officer.

Further Education classes continue to be well attended on the Tuesday evenings, approximately 60/65 trainees being involved in music, cookery, art, crafts, woodwork, metalwork, dancing, together with "special evenings".

We would like to place on record our appreciation to Messrs. Cousins Ltd., for their continued support in supplying confectionery, free of charge, for teas at our evening classes.

Our Senior Officer on the female side said farewell to the Centre during the year to take up an appointment in Salisbury, Rhodesia. This is the first major staff change since the opening of the Centre in 1965.

Numerous visitors have inspected the Centre, amongst whom have been a group of students from Yugoslavia."

"Chapel Hey" Mental Health Residential Rehabilitation Hostel".

Mr. J.D. Edwards, Superintendent of the Hostel reports as follows:—

Although the number of referrals to "Chapel Hey" is slightly less than that in the previous year, it is to be noted that those cases accepted were all cases which come under the category of special difficulty and therefore required intensive social rehabilitation.

Of the total admissions, three only required a further period of in-patient treatment. The excellent lines of communication and the treatment available for these cases, within the hospital services, made possible their rapid return to the community.

It is to be noted with interest that a great majority of ex-residents continue to visit "Chapel Hey" for help and advice.

Psychiatric Social Club

Due to re-decoration and possible structural repairs to the social hall, the club met on only seven occasions. A new committee has been elected and the club will re-open in October, 1969.

Community Care Aspects

The new community arising around "Chapel Hey" on the Sandbrook Estate continue to give great support and total social acceptance and integration is very apparent from the residents' point of view.

Senior Citizens' Club

Meetings continue each Thursday with an average attendance of approximately 65 senior citizens.

Visits have been made to local industries and amongst the social activities held at "Chapel Hey" have been hot-pot suppers, concerts and 'bingo' sessions.

Senior Citizens' Clubs from other areas have been invited to these functions which have proved to be a great success.

35 members are booked to proceed on holiday in Devon next year and the annual outing will take place in June, 1969 to Anglesey.

Play Group Centre

This group, which commenced in September, 1968, and which is registered in accordance with the Nursery & Child Minders Regulation Act offers its services to the parents of pre-school children i.e. within the age group 3 - 5 years. The centre is well attended.

"CHAPEL HEY" January/December, 1968.

ADMISSIONS.

Number resident 31st December, 1967 - (26 adults, 3 childre

Authority	Male	Female	Day Case	Children accompanied by parents
Wallasey	5	6	-	-
Cheshire	6	7	-	-
Birkenhead	-	2	-	-
Lancashire	-	1	-	-
Chester City	-	1	-	-
Totals	11	17	-	-

Total Admissions:— 28 adults

Admitted for Leave Periods from Hospital — 1

Category of Psychiatric Illness

Neurosis		Psychosis		Sub-normality	
Male	Female	Male	Female	Male	Female
1	3	10	15	-	-

Employment Placement

	Not employed on admission	Employed (open)
Male	10	1
Female	14	3

	Not employable due to psychiatric disability	Not employable due to social, domestic reasons
Male	2	-
Female	4	3

Placed in Employment from "Chapel Hey"

	Open	Sheltered
Male	8	-
Female	7	-

DISCHARGES

(a) To Hospital.

Discharged to Hospital for further Treatment. Not re-admitte to Hostel - 5

(b) To Community.

Home	Other accommodation
25 adults 2 children	1 adult.

No. resident 31.12.68. 23 adults; 1 child.

ENVIRONMENTAL HEALTH SERVICES

I) Report of the Chief Public Health Inspector on the Environmental Health and Hygiene of the Area.

II) Report of the Chief Weights and Measures Inspector relating to Food and Drugs Act, Fertilisers and Feeding Stuffs Act etc.

REPORT OF CHIEF PUBLIC HEALTH INSPECTOR ON THE ENVIRONMENTAL HEALTH AND HYGIENE OF THE AREA.

I have pleasure in presenting my annual report on the work of the public health inspectors during the year 1968.

Slum Clearance

During the year only two small areas containing 5 houses received the approval of the Council for the making of clearance orders. A further 86 houses were inspected in detail for action under the slum clearance programme, but the areas were not formally declared by the Council as decisions on the method of procedure had not been resolved.

2 voluntary undertakings to demolish, 1 voluntary undertaking to close unfit houses and 4 undertakings to close certain unfit rooms were approved by the Council. 1 closing order was also made regarding an unfit house.

Clean Air Act 1956 and 1968

I am pleased to report that steady progress is being maintained in the abatement of atmospheric pollution. No. 13 Smoke Control Order came into operation on the 1st October. The total number of houses in the 13 areas now in operation is 22,762, which is a little over 70% of the total houses in the borough. The Belvidere No.14 Smoke Control Order containing 2,559 houses was submitted to the Ministry for approval towards the end of the year.

Offices, Shops and Railway Premises Act 1963

During 1968 all district inspectors carried out inspections, but unfortunately staffing problems occurred, particularly towards the end of the year, when in the last quarter only four inspectors remained to deal with seven districts. The inspectors have many other environmental health duties to perform in addition to their responsibilities under this Act and as demands on the remaining inspectors were increased in all these matters it was inevitable that the 100% inspection rate achieved last year could not be maintained. It is to their credit that despite these difficulties an overall rate of just over 81% was recorded. All offices in the borough received a general inspection.

The results of the hard work of the previous three years have, however, really made themselves apparent in this year's inspections and I am pleased to record the

significant and apparent improvement made in the working conditions of some 4,500 employees in Wallasey. Contraventions relating to such matters as cleanliness, effective lighting and heating, the provision of good sanitary accommodation, hot water and adequate washing facilities, suitable seating and proper guarding of dangerous machinery have been slashed to very low levels. This progress has become accepted to such a degree that it is difficult to envisage that reasonable standards in such matters were lacking in a large number of premises only four years ago. The Table on page 104 illustrates these points clearly.

Food Hygiene

The number of visits made to food shops and catering premises was 2,667, compared with 2,643 the previous year. Considering the severe shortage of staff for a large proportion of the year it is very gratifying that this important section of our work has been maintained at its previous level.

Legal proceedings were taken against three occupiers of food premises for non-compliance with the Food Hygiene (General) Regulations 1960, which resulted in fines and costs totalling £175. 10s. 0d. being imposed.

Two cases were taken against the owners of food vehicles for non-compliance with the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations which resulted in fines totalling £37.

Noise Abatement

Occupiers of dwellinghouses which are adjacent to factories, especially those where night work is carried on have been the main complainants regarding noise nuisance. The investigation of these complaints has proved to be very time-consuming, as numerous visits have to be made, readings taken and interviews held with managements and consultants to discuss the best possible remedies. Many of these visits had to be late at night and in the early hours of the morning, when the background noise level was at its lowest. I am pleased to report that we have received good co-operation from the factory managements.

Staff

Three of the district public health inspectors resigned during the year, the vacancies being advertised on numerous occasions, but no suitable applicants applied for the posts. One pupil inspector was successful in passing his intermediate examination.

May I again express my appreciation of the support received from the Chairman and Members of the Health Committee and from the Medical Officer of Health and for the co-operation of officials in other departments. Finally may I thank the members of my section for their efforts, with special thanks to Mr. Shaw, my Deputy, and to Mr. Hughes, Senior Inspector, for the many extra hours of duty put in late at night in investigating noise complaints.

ABATEMENT OF NUISANCES

The nuisance provisions of the Public Health Act have again been the mainstay for the remedying of defects at dwelling houses.

Complaints during the year numbered 2800 as compared with 2536 in 1967, 20,890 visits were made to dwelling houses. 1103 preliminary and 877 statutory notices were served during the year. Below is a summary of the defects remedied.

Dwelling Houses

	Defects remedied.
Roofs repaired	577
Gutters and Spouts repaired or renewed ..	535
External walls and chimneys repaired ...	203
Damp Proof courses provided	132
Yards paved or repaired	73
Internal walls and ceilings repaired	190
Doors, Windows, repaired or renewed ...	159
Floors repaired or renewed	81
Rooms, passages, etc., cleansed or redecorated	5
Staircases, handrails repaired	11
Fireplaces, stoves, flues, repaired or renewed	10
Sinks, baths, washbasins, repaired or renewed	23
Food stores provided or improved	2
Water supply improved or reinstated ...	43
W.C.'s cleansed or decorated...	11
W.C.'s repaired or provided	154
Soil/waste pipes, repaired or renewed ...	66
Drains cleansed from obstruction	87
Drains repaired or improved	13
Drainer boards repaired or renewed ...	6
Miscellaneous Improvements effected ...	153
Total ...	2,534

General Environmental Public Health Nuisances Abated

	Notices Abated
Removal of Offensive Accumulations and Cleansing of Ditches and Streams	21
Cinemas, Dance Halls: Contraventions ...	-
Schools: W.C.'s - Repairs and Renewals ...	-
Schools: Other Nuisances	-
Other-Improvements effected	-
Public Conveniences Improved	-
Keeping of Animals	-
Total ...	21

Total Number of Notices Served (All Acts)

	Served	Abated
Preliminary	1334	1181
Statutory	1028	1181
	2362	2362

Legal Proceedings

No. of Summonses issued	25
No. of cases heard	6

Total amount of fines and costs £35. 3s. 0d.

In 4 cases "Nuisance orders" were made by the magistrates. The remaining cases were withdrawn as the work was completed prior to the court proceedings.

No. OF FOOD BUSINESSES EXISTING WITHIN THE BOROUGH AT 31st December, 1968.

Classification according to the areas administered by the District Public Health Inspectors.

Type	Seacombe	Egremont	Poulton	Liscard	New Brighton	Wallasey Village	Moreton	Total
+ * School Kitchens and Canteens	10	8	5	7	7	10	12	59
Local Authority Hostels								
+ * Nurseries, etc.	1	3	-	4	3	-	4	15
+ * Other Local Authority Premises	-	5	6	1	2	-	4	18
+ * Grocers	12	22	15	12	14	8	15	98
+ * Cafes	8	5	3	4	71	5	6	102
+ * Greengrocers	9	19	14	16	12	17	15	102
+ * Confectioners and Bakehouses	6	6	9	8	7	12	11	59
* Sweets	17	28	13	25	37	23	26	169
+ * Butchers	10	10	7	13	6	12	14	72
+ * Fried Fish	7	7	3	7	9	4	10	47
+ * Shellfish and Refreshment Stalls	-	-	-	-	21	-	2	23
+ * General	20	8	7	25	14	6	12	92
+ * Food Preparing Premises..	5	-	1	4	4	2	4	20
+ * Wet Fish	2	1	2	3	1	2	4	15
* Chemists and Druggists ..	5	5	5	6	4	6	6	37
+ * Club Premises and Canteens	11	5	4	12	9	12	13	66
+ * Licensed Premises	17	8	9	23	29	11	14	111
+ * Miscellaneous	-	1	1	1	-	-	-	3
+ * Supermarket	3	1	1	6	2	11	9	33
TOTALS	143	142	105	177	252	141	181	1141

* All premises fitted to comply with Reg.16.
\+ All premises fitted to comply with Reg.19.

FOOD AND DRUGS ACT, 1955: FOOD HYGIENE

Food Premises

No. of Visits to All Premises	2667
Viz—	
(a) Cafes, etc.	241
(b) School Meals	51
(c) Other F.P.P.	186
(d) Licensed Premises	216
(e) Ice Cream: Visits re Registration	21
" " Manufacturing Premises ...	91
" " Sales and Storage Premises	242
(f) Food Shops	1934
(g) Sec. 16b Premises	105

Work Carried out under Food Hygiene Regulations

Premises cleansed or repaired	60
Equipment cleansed or repaired	21
Hot cold water supply provided, or improved	8
Sinks, washbasins provided or improved	19
Food storage facilities provided or improved	3
Personal hygiene improved	5
Sanitary accommodation cleansed, repaired or improved	14
Miscellaneous improvements effected	22
Total ...	152

Registered Food Premises

The Minister of Health has requested that a classification of registered premises be included in this report. The required information is as follows:-

	No. of Premises	No. of Visits
Section 16(a) Food and Drugs Act, 1955	632	354
Section 16(b) Food and Drugs Act, 1955	199	105
Total	831	459

(N.B.—A classification of the types of premises registered under section 16(a) is given in the part of the report dealing with ice cream).

Summary of Types of Food Premises Registered under section 16 (b) Food and Drugs Act, 1955

Bakehouses, Meat Pies	46
Meat Pies and Cooked Meats ...	19
Butchers, Sausages	53
Sausages and Cooked Meats	28
Grocers, Potted Meats	2
Boiled Hams	11
Cooked Meat Factories	2
Other Premises, Meat Pies	4
Chicken Roasting	34

FOOD HYGIENE (GENERAL)REGULATIONS and MARKETS, STALLS & DELIVERY VEHICLES REGULATIONS

During the year several premises were found to be in serious contravention of the Regulations, some despite several previous warnings. In these instances legal proceedings were instituted and details are given below:-

Nature of Offence	Result	
Dirty conditions in bakehouse	£5 & £5 costs.	
Dirty conditions in cafe	£55 & £10.10s.0d.costs.	
Dirty food vehicle	£17.	
Dirty conditions in bread depot ...	£100.	
Dirty food vehicle with inadequate facilities and unsatisfactory personal cleanliness	£20.	
Total	£197	£15.10s.0d.

CONTROL OF ICE CREAM PREMISES

104 samples of ice cream and 7 lolly ice samples were taken during the year. All were submitted to the Public Health Laboratory for examination. The lolly ice samples were all satisfactory and the results and classification of the ice cream samples are summarised below.

ICE CREAM SAMPLING 1968

Classification of Samples by Location of Manufacturer.

Ice Cream Manufactured in Wallasey

	No. of Samples
Grade 1	39
Grade 2	20
Grade 3	11
Grade 4	6
	76

Ice Cream Manufactured outside Wallasey

	No. of Samples
Grade 1	10
Grade 2	8
Grade 3	2
Grade 4	8
	28

Sampling has again been concentrated on soft ice cream which is in the light of experience undoubtedly the type most subject to fluctuation in sample quality. The number of local manufacturers of soft ice cream has increased and every effort is made to demonstrate to new manufacturers the importance of regular and meticulous cleaning and sterilisation of this type of machine. When unsatisfactory samples are obtained cleaning routines are observed and this often reveals the source of the trouble. Sealing rings are sometimes found to be cleaned in situ, subsequent removal demonstrating build-up of solids behind the ring; a properly cleaned and sterilised machine is sometines "dried off" with a cloth or towel reintroducing organisms and rendering the sterilisation process negative. Sterilants have been found out of date often due to bulk buying by the small trader, who does not realise that such materials deteriorate and the purchase of a pasteurised mix in the returnable containers often reveals problems in the cleansing of the containers.

Where manufacturers from outside the borough show unsatisfactory results the details are referred to my colleagues in the appropriate authorities for the necessary action.

Ice Cream Statistics-Relative To The Year 1968.

Registrations Approved

Sale and Storage	5
Manufacture, Sale and Storage	2
Total ...	7

Registrations Refused	1
Registrations Cancelled	Nil

Number of Premises on Register at close of Year

Storage only	4
Storage and Sale	610
Manufacture, Storage and Sale	17
Total ...	631

Results classified according to identity of Manufacturer

Ice Cream sampled at point of sale within the County Borough District of Wallasey during 1968.

Factories outside Wallasey-Table I.

Manufacturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manufacturer by Ministry of Health recommended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satisfactory	Unsatisfactory
1	3	2	1	-	-	Not classified	
2	2	-	2	-	-	Not classified	
3	3	2	1	-	-	Not classified	
4	1	1	-	-	-	Not classified	
5	8	2	1	-	5		*
6	5	1	1	1	2		*
7	1	-	-	1	-	Not classified	
8	1	1	-	-	-	Not classified	
9	1	-	-	-	1	Not classified	
10	3	1	2	-	-	Not classified	
	28	10	8	2	8		
		(35.8%)	(28.5%)	(7.2%)	(28.5%)		

Factories located in Wallasey-Table II.

Manufacturer Code No.	No. of Samples examined	No. of Samples in Provisional Grades				Grading of Manufacturer by Ministry of Health recommended Standards	
		Grade 1	Grade 2	Grade 3	Grade 4	Satisfactory	Unsatisfactory
1	4	4	-	-	-	*	
2	12	7	3	2	-	*	
3	8	5	2	1	-	*	
4	10	6	3	1	-	*	
5	4	1	2	1	-		*
6	12	3	4	3	2		*
7	7	5	2	-	-	*	
8	7	5	2	-	-	*	
9	6	3	1	2	-		*
10	2	-	1	-	1	Not classified	
11	2	-	-	1	1	Not classified	
12	2	-	-	-	2	Not classified	
	76	39	20	11	6		
		(51.3%)	(26.3%)	(14.4%)	(8%)		

NOTES-1. Figures in parenthesis denote percentages.
2. The indication "Not classified" in the Grading Columns of the above Tables occurs where insufficient samples have been taken.

THE LIQUID EGG (PASTEURISATION) REGULATIONS, 1963.

Number of egg pasteurisation plants in the district	Nil
Number of samples of liquid egg submitted to the Alpha-Amylase test	6

All samples satisfied the Alpha-Amylase test and Salmonella organisms were absent in all cases.

CONTROL AND SUPERVISION OF MILK SUPPLIES

All milk supplies are brought into the area already sealed in bottles and cartons, and for some commercial uses in sealed churns, from processing dairies outside the borough to local depots, from which distribution takes place. Pasteurised and sterilised milk forms the bulk of our daily supply, together with a relatively small amount of untreated milk. A small amount of ultra heat treated milk is also being marketed. Sampling has been carried out over the whole range of milk on sale. All samples of untreated milk are subject to the milk ring test for brucellosis, which may give rise to undulant fever in man, and to the animal inoculation test for tuberculosis. The Ministry of Agriculture, Fisheries and Food programme of tuberculosis eradication in cattle has proved most successful and a concentrated effort is now being made to secure the eradication of brucellosis in all herds. Whenever possible the Public Health Laboratory has also carried out tests on untreated milk samples for the presence of Rickettsia Burneti which causes Q fever in man.

Thirteen complaints were received involving milk supplies; investigations were carried out and in one case legal proceedings were instituted for a bottle of milk containing fruit fly larvae. A £20 fine was imposed. In the case of all other complaints warnings were given where necessary to the persons responsible.

The following is a summary of sampling carried out during the year:-

Source of Sample.	Total	Pasteurised				Sterilised		U.H.T.		Untreated	
		M.Blue		Phosphatase		Turbidity		Colony Count		M. Blue	
		Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail	Pass	Fail
Milk Depots	9	4	-	4	-	3	-	1	-	1	-
Milk Delivery Vehicles.	12	7	-	7	-	5	-	-	-	-	-
Milk Vending Machines.	4	-	-	-	-	-	-	-	-	4	-
Shops	4	3	-	3	-	-	-	-	-	1	-
Schools	5	5	-	5	-	-	-	-	-	-	-
School Kitchens	2	2	-	2	-	-	-	-	-	-	-

All untreated samples were subjected to the Ring Test for Brucellosis and the Animal injection test for Tuberculosis. All samples passed both these tests.

The Milk and Dairies (General) Regulations 1959

The Milk and Dairies (Special Designation) Regulations 1963

During the year checks were made and the necessary action taken to secure the registration of premises selling milk.

Milk in Schools Scheme

Milk has again been supplied to the schools in one-third pint cartons by the three main dairy undertakings. During the year 2,224,655 one-third pint cartons were supplied - a decrease of 351,391 on the previous year.

WALLASEY LAIRAGES

Landing place for Irish and Isle of Man animals and foreign animals landing wharf

This year 14,595 store and fat cattle were accommodated and subsequently despatched by rail and road transport from the lairage at this landing place.

Of the animals detained by the veterinary inspectors, 14 were slaughtered, as compared with 85 in 1967.

The use of this port slaughterhouse is confined exclusively to the slaughter of cattle in which, following disembarkation, evidence of illness or injury has been diagnosed by the Ministry's veterinary inspectors.

Post mortem examination of all carcases, viscera and offals is carried out and the following is a tabulation of the diseased conditions met with and the condemnations made:—

Number killed 14
Number inspected 14

All diseases except Tuberculosis and Cysticerci

Whole carcases condemned	Nil
Carcases of which some part or organ was condemned	12
Percentage of the number affected with disease other than tuberculosis and cysticerci	86%

Tuberculosis only

Whole carcases condemned	Nil
Carcases of which some part or organ was condemned	Nil

Cysticercosis

Carcases of which some part or organ was condemned	Nil
Carcases submitted to treatment by refrigeration	Nil
Generalised and totally condemned	Nil

Total weight of meat and offal condemned

Meat	15 lbs
Offal	108 lbs

9 visits were made during the year to the slaughterhouse at this landing wharf.

MEAT AND FOOD INSPECTION

Visits made to food shops and to other premises engaged in the distribution, preparation and handling of food resulted in the following foodstuffs being certified as unfit for human consumption:—

	Tons	Cwts.	Lbs.
1. Meat at slaughterhouses		1	11
2. Fresh meat at retail shops	1	3	18
3. Fish			8
4. Cooked meat and meat products			92
5. Poultry.....	1	4	11
6. Canned meat.....		4	63
7. Fruit - a) canned and dried		6	20
b) raw			Nil
8. Vegetables a) canned		3	11
b) raw			Nil
9. Frozen foods	1	11	81
10. Other foods		13	66
Total	5	8	45

Consumer Complaints

133 consumer complaints were received during the year, covering a wide variety of foodstuffs. The broad outlines of these complaints can be extracted from the table set out below. It is interesting to note that 45% of complaints relate to foreign bodies in food, or to mouldy foods and the department has continued to give these two subjects a considerable amount of attention during the year.

Type of Food	No. of Complaints	Foreign Objects	Mouldy	Classification of Complaints			
				Allegedly Unsound	Allegedly Dirty	Parasitic Condition	Miscellaneous
Bread	25	10	10	1	1	-	3
Tinned foods	18	6	6	4	-	-	2
Meat & meat products	36	6	4	15	-	-	11
Milk & milk products	15	4	-	2	6	-	3
Confectionery	10	1	2	-	-	-	7
Fish & fish products	9	2	-	2	-	2	3
Sweets	3	-	1	-	-	1	1
Soft drinks	1	-	-	-	-	-	1
Butter	1	-	-	-	-	-	1
Dried fruit	2	-	-	-	-	-	2
Cereal	2	2	-	-	-	-	-
Preserves	5	3	1	-	-	-	1
Vegetables	1	-	-	1	-	-	-
Miscellaneous	5	2	-	-	-	-	3
	133	36 (27.0%)	24 (18.0%)	25 (19.0%)	7 (5.2%)	3 (2.2%)	38 (28.6%)

In all cases of the presence of foreign objects the management of the firms concerned are interviewed in detail about their process and where loopholes in the system are discovered, advice is given to ensure the best possible protection, Mouldy foods are basically a product of poor stock rotation, or as described later, some negligence in handling and distribution, The question of proper coding of perishables has been taken up at high level with the main large food retailers in the area, and coding systems have been suggested. The smaller retailers are advised personally. With modern methods of marketing - self service, etc. - it is relatively easy if shelves are re-stocked before all the old stock is sold, to have several old packs exposed for sale. The old scheme of putting new stock to the back or bottom of the display is far from foolproof, as the customer is inclined to be selective and moves about the items in a display. Coding of perishables in a form known to the shop manager is the only suitable answer and this is being strongly recommended to all food traders.

Distribution checks by firms are frequently found to require some improvement, as in many cases it has been found that certain types of food have been relatively old (within their particular life span) when delivered to the shops. Methods of opening carboard cartons of tinned foods have been demonstrated during the year to be carelessly operated in some cases. The careless use of

knives slashing open cardboard cartons of tinned foods has often been found to score the tins and in a good number of instances this practice has resulted in the penetration of the tin with the resultant ingress of air. In these circumstances the contents become no different from any cooked food left to stand for days and the cans on being opened exhibit mouldy or decomposed contents. All food traders are informed of the dangers of this practice.

The changing methods of presentation, packaging and sale of food to the public are maintained under constant observation in an attempt to ensure that the food is sold in as good and fresh a condition as possible. To this end much advice has been given by the department and it is hoped that ultimately the results will be reflected in diminishing complaints of stale and mouldy foodstuffs.

Complaints to the department are encouraged and each one receives a very full investigation. Legal proceedings were instituted in eight cases. In all of these fines were imposed. Details of the cases are appended below.

Nature of complaint	Result	
1. Mouldy bread.	£50 fine 30/- Witness expenses.	
2. Blackcurrant tart containing wasp.	£10 fine.	
3. Bread roll containing fly.	£10 fine.	
4. Sausages decomposing.	£25 fine.	
5. Metal nail in fish.	£10 fine, £3.3.0. costs.	
6. Mould on tinned pork luncheon meat.	£25 fine.	
7. Mould on contents of tinned Steak & Vegetable.	£25 fine.	
8. Mould on meat pie.	£5, fine & £5 costs.	
	£160	£9.13.0.

PUBLIC HEALTH (SHELLFISH) REGULATIONS

Cockle beds - Moreton, Leasowe and Wallasey Foreshore

The Liverpool Port Health Authority is the enforcing Authority for the above Regulations and this department acts in liaison with that Authority.

The sterilising plant formerly used in a neighbouring Authority has not been in operation this year. Cockles were, however, still gathered from the beds and sterilisation was carried out at a plant situated in Lancashire.

DISEASES OF ANIMALS ACTS AND ORDERS

The year saw the end of the worst outbreak of foot and mouth disease in this country. Restrictions on the movement of animals imposed in October 1967 were removed from this area on the 24th of April. Wallasey and the north end of the Wirral remained free from infection and a constant watch was kept on all premises where cloven footed animals are kept. Close liaison was maintained with the Police and the Ministry of Agriculture, Fisheries and Food throughout the outbreak and the co-operation of all persons concerned with the keeping of animals has been excellent. Letters, circulars and press notices relating to disease control have been distributed and published and advice has been given wherever relevant.

Regulation of Movement of Swine Order 1959

The usual supervision of store pigs moved under licence into piggeries within the area was made, checks showing that the pigs were retained for the required period. Regular routine visits were made to all piggeries.

Diseases of Animals (Waste Foods) Order 1957.

Inspections have been made of all premises and plant affected by this Order and the importance of strict compliance with the terms of the Order emphasised. It is essential to assist in the prevention of spread of foot and mouth and other diseases that plant operators comply strictly with this piece of legislation.

General

Observations have been made on the Wallasey docks of incoming vessels to ensure that no dogs, poultry or hay or straw were being illegally landed, contrary to the Regulations imposed for the prevention of spread of animal disease.

Poultry Inspection

There are no poultry processing premises within the district.

The Meat (Staining and Sterilisation) Regulations 1960

Inspections were made of premises from which animal feeding meats are sold, to ensure compliance with the above Regulations.

The Riding Establishments Act 1964

Three establishments are licenced under this Act the total number of animals in these premises is thirty-twenty-six donkeys and four ponies. The premises were all satisfactory and licences were renewed. All animals have been subjected to the quarterly veterinary inspection and were all in good health and well cared for. Checks have been made throughout the year on premises where the odd pony is stabled to ensure that no riding establishments are being operated without being licenced under the Act.

MERCHANDISE MARKS ACT

Check visits and inspections were made for the purpose of ascertaining that meat and offal, etc. were correctly described on exposure for retail sale.

HOUSING

Rent Act, 1957.

PART I: Applications for Certificates of Disrepair

(1)	Number of applications for certificates	2
(2)	Number of decisions not to issue certificates	Nil
(3)	Number of decisions to issue certificates—	
	(a) in respect of some but not all defects ...	Nil
	(b) in respect of all defects	2
(4)	Number of undertakings given by landlords under paragraph 5 of the First Schedule ...	1
(5)	Number of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule	Nil
(6)	Number of Certificates issued	1

PART II: Applications for Cancellation of Certificates

(7)	Applications by Landlords to Local Authority for cancellation of certificates ...	1
(8)	Objections by tenants to cancellation of certificates	Nil
(9)	Decisions by Local Authority to cancel in spite of tenants' objection	-
(10)	Certificates cancelled by Local Authority	1

Clearance and Demolition of Unfit Houses

Work continued during the year on the clearance of the houses in the Council's third five-year programme. The procedure is protracted, involving detailed inspection, the serving of notices and where objections are lodged, the conducting of a public local inquiry by an Inspector of the Ministry of Housing and Local Government. The following orders, etc., were made during the year:-

The Wallasey (Clearance No.138) Borough Road Clearance Order 1968.

83 & 85 Borough Road.

The Wallasey (Clearance No.133) Belle Vue Road Clearance Order 1968.

24, 26 & 28 Belle Vue Road.

A further 86 houses were inspected for clearance action, but the areas were not formally declared by the Council during the year, as decisions on the methods of procedure had not been decided.

Demolition Orders.

None.

Closing Orders.

25 Seabank Road.

Voluntary Undertakings to Demolish.

31 Reedville Grove.
36 Trafalgar Road.

Voluntary Undertakings to Close.

2 Walmsley Street.

Voluntary Undertakings to Close Certain Rooms.

104 Brighton Street.
30 Pickering Road.
3 St. Hilary Drive.
37 Tollemache Street.

Progress Report of Action under Housing Acts, 1930-1961.
Position as at 31st December, 1968.

	No. of dwelling houses demolished		Number of persons displaced
	Unfit	Other	
(1) Land coloured "pink"	1580	-	4360
(2) Land coloured "grey"	-	52	154

HOUSING ACT, 1957
Unfit Houses not included in Clearance Areas

	Number of houses	Number of persons displaced
(1) Housing Act, 1957:-		
(a) Houses demolished as a result of formal or informal procedure under Sec. 17 (1)	526	1581
(b) Local Authority owned houses subject to certificates of unfitness	45	98
(c) Houses closed in pursuance of an undertaking given by the owners under Sec. 17	27	83
(d) Parts of buildings closed (Sec. 18)	26	51
(e) Houses made fit:-		
(i) as a result of formal notices under Sec. 9 to 12	416	-
(ii) as a result of informal notices preliminary to formal procedure under Sec. 9 to 12	604	-
(f) Closing Orders made under Section 17	14	24
(g) Demolition Orders determined and Closing Orders substituted under Section 26	-	-
(h) Demolition Orders quashed under Section 24	-	-

Houses in Multiple Occupation

The survey of houses of this type was continued during the year, when 40 houses were inspected. In each case an interview with the owner at the house was arranged and the requirements of the Housing Act, 1961, were explained and discussed. The Fire Prevention Officer and Building Inspector were present at these meetings. The houses surveyed comprised 137 apartments which were occupied, by 239 persons. 18 Statutory Notices were served under Section 15 of the Housing Act, 1961. Nine of the houses inspected required no works to be executed.

The following table indicates the deficiencies existing in the apartments inspected:-

Natural and artificial lighting	8
Ventilation	3
Water Supply:-	
Hot	44
Cold	5
Personal washing facilities	4
Drainage	1
Sanitary conveniences	3
Facilities for: storage of food	53
preparation of food	3
cooking of food	2
Installations for space heating	22

During the year 18 houses ceased to be let in multi-occupation and in 12 houses the work specified in Statutory Notices was completed. Work was in progress in a further six houses.

The work under this Act involved 705 visits to sub-let apartments.

Overcrowding and Allocation of Tenancies

The Council continued to operate its Group-plus-Points Scheme for re-housing. Re-housing of families from unfit houses remains outside the points scheme. The following summary shows the shares of lettings now in force.

Overcrowded, tenants, and sub-tenants) and not overcrowded sub-tenants)	85%
Health	12%
Emergency	3%

All overcrowding cases must have been overcrowded for at least one year to obtain the extra points allocated for overcrowding.

During the year the housing circumstances of 390 families were investigated in connection with housing applications, 234 of these as a result of applications for inclusion in the "Overcrowded" group. 49 families were found to be overcrowded for the purposes of the points scheme, which employs a better standard than that of the Housing Act.

Applications for rehousing on health grounds showed an increase of 175 on the previous year. 337 applications were considered, which included 181 applications for transfer from Corporation property. It is only possible for the most urgent cases to be recommended for rehousing under Group 111 of the Points Scheme and only 31 applicants in this class received the approval of the Medical Officer of Health. In one instance the illness giving rise to the need for rehousing was pulmonary tuberculosis. The bulk of the applications came from persons suffering from arthritis, heart disease and high blood pressure. These cases all require ground floor accommodation.

Housing Applications 1968

Summary of applications for rehousing on Health Grounds.

	Tuberculosis		Other Cases	
	Approved	Rejected	Approved	Rejected
Tenants	1	7	22	75
Sub-Tenants living in rooms	Nil	2	8	41
Totals	1	9	30	116

Of the 181 applications for transfer on medical grounds, 50 received the support of the Medical Officer of Health.

Provision of New Houses

The Borough Architect has provided the following report on the provision of new housing accommodation:-

	During 1968	Post-War Period (inc.1968)	In Progress 31/12/1968.
Houses erected by private enterprise	60	2449	114
Units of accommodation erected by Local Authority under Housing Acts	205	5169	265
Tenant Ownership Houses erected by Local Authority	-	174	-
Houses erected by Housing Association	-	-	15

INSPECTION OF FACTORIES

The number of factories on the register at the end of the year was 226. 139 visits were made. An abstract of the results of these inspections in the form required by the Minister of Labour is as follows:-

Administration of the Factories Act, 1961.
Inspections for Purposes of Provisions as to Health.

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced	27	4	1	-
Factories not included in above in which Section 7 is enforced by the Local Authority	172	113	5	-
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers, premises)	27	22	-	-
Totals	226	139	6	-

Cases in which defects were found

Particulars	Found	Remedied	Referred		No. of cases in which prosecutions were instituted
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	-	-	-	-	-
Overcrowding (S.2)...	-	-	-	-	-
Unreasonable temperature (S.3)...	-	-	-	-	-
Inadequate ventilation (S.4) ...	-	-	-	-	-
Ineffective drainage of floors (S.6)...	-	-	-	-	-
Sanitary Conveniences (S.7):- ...					
(a) Insufficient	-	1	-	-	-
(b) Unsuitable or defective ...	9	10	-	3	-
(c) Not separate for sexes ...	-	-	-	-	-
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	-
Totals	9	11	-	3	-

Outwork
Wearing apparel-making, etc. Number of outworkers in Aug. list required by section 133 ... -
Visits made ... ... -

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

The Offices, Shops and Railway Premises Annual Reports Order, 1964 prescribes certain statistics to be contained in local authorities annual reports. These are to be found in Appendix I. Some further detail has been recorded by the department with a view to indicating the actual conditions found on inspection and these can be found in Appendix II.

Changes of occupiers, closure of premises and occupiers ceasing to employ staff give rise to a "floating" section on the register and 105 registrations were cancelled during 1968. 84 new registrations were received, giving 1,043 premises (a reduction of 23) on the register at the end of the year.

General

Of the 850 premises receiving a general inspection, contraventions were found at 210. Most of these were minor contraventions, such as incomplete first aid outfits, missing abstracts and thermometers, etc. and an informal warning was sufficient in all cases to obtain full compliance with the Act. At 270 premises where such notification had been given (this figure includes a carry-over from 1967) the specified contraventions have now been remedied.

The administration of the Act is still running smoothly and when a return to normal staffing is achieved I have no doubt that a 100% general inspection rate will again be achieved. The number of contraventions shows a marked reduction on previous years and in my opinion this is due in no small measure to regular inspection.

Plans of proposed alterations and new buildings are sub-mitted to the department for examination for compliance with the Act. This is a valuable procedure which presents opportunity for discussuon with the developers, often resulting in high general standards.

Cleanliness (Section 4)

All premises and fittings must be kept clean and free from accumulations of rubbish.

Only 58 contraventions were found with regard to cleanliness and these in the main only relate to a part of the premises. The figure should not, therefore, be taken to imply total uncleanliness. Clean premises are a basic element in the creation of a good working environment and this low level of contravention is most encouraging.

Overcrowding (Section 5)

Rooms in which people work must not be so overcrowded as to cause risk of injury to health. In this connection the space occupied by furniture, machinery, etc. is taken into account. In rooms other than those to which the public resport a minimum standard is laid down by the Act, with which all premises must comply. This relates to space per employee which must be 400 cu.ft. per person, discounting any ceiling height over 10 ft.

Three office premises were found to be overcrowded and in two cases the overcrowding was abated before the end of the year, the third having already made arrangements for necessary reconstructions.

Temperature (Section 6)

A reasonable temperature must be maintained in every workroom. A statutory minimum of 16°C (60.8°F) after the first hour for work other than that involving severe physical effort is specified by the Act. Safeguards are provided where this temperature may cause deterioration of goods and in this instance suitable effective points of heating must be provided and employees given reasonable opportunities to use them.

Twenty-eight contraventions were found under this section. Special effort is made to ensure that all premises receive visits during the winter months, either on general inspection or revisit, to check heating when the greatest demands are being made upon it.

Ventilation (Section 7)

In all workrooms effective and suitable means of ventilation must be provided.

Inadequacy of ventilation has not featured prominently in premises inspected. Service of 11 notices was necessary, usually requiring maintenance to existing means of ventilation.

Modern design to shop fronts still, in some instances, overlook the need for ventilation and a constant watch is necessary when alterations are proposed that adequate means of ventilation will be provided.

Lighting (Section 8)

Suitable and sufficient lighting must be provided and maintained in all parts of premises where people work or pass.

Lighting reached a standard (except in 6 cases) which could be termed adequate, but not ideal. Many shop and office proprietors have not been convinced of the fact that expenditure on modern fluorescent lighting not only greatly improves the standard of lighting, but also reduces the electricity consumption. Good lighting is complementary to cleanliness and is being encouraged constantly.

Sanitary Conveniences (Section 9)

Suitable and sufficient sanitary accommodation must be provided. The Sanitary Accommodation Regulations made under the Act lay down numerical standards, together with other conditions regarding privacy, etc.

Again a marked improvement can be noted. Only 47 cases of contraventions of the Act and Regulations were detected.

Washing Facilities (Section 10)

Suitable and sufficient washing facilities must be provided, including a supply of clean, running hot and cold water, soap and towels, etc. The Washing Facilities Regulations made under the Act detail the type and number of the facilities required relative to the number of employees.

All registered premises now have washing facilities. Only 26 contraventions were found; these resulted from such omissions as failure to switch on the water heater, to supply soap and towels etc., and were quickly remedied.

Drinking Water (Section 11)

An adequate supply of wholesome water must be conveniently available to employees.

All registered premises have a supply of drinking water laid on and it was not necessary to serve any notices under this section.

Accommodation for Clothing (Section 12)

Suitable accommodation for the hanging of outdoor clothing must be provided. This presents few problems, only 2 contraventions being found.

Seating (Section 13 and 14)

Seats for sedentary workers must be suitable in design, construction and dimensions. Foot rests must be provided if necessary. Where employees have opportunities for sitting without detriment to the work, sufficient

conveniently accessible seats must be provided. In shops such seats must be in the ratio of at least 1 to every 3 employees.

I am pleased to report that all seating provided in offices was found upon inspection to be suitable and adequate for the employees' needs. Employers are now aware that comfortable and suitable seating is contributory to efficient working.

Four cases of shops not providing seating in the ratio of 1 to 3 employees were found. The omissions have now been rectified.

Facilities For Eating (Section 15)

Few employees appear to take meals on the premises, but where they do adequate provision was found in all but one case.

Floors, Passages And Stairs (Section 16)

All floors, stairs, steps and passages must be soundly constructed and maintained and kept free from obstruction and slippery substances. Handrails must be provided to staircases and open sides must be guarded. Openings in floors must be securely fenced.

45 contraventions were found under this section. In the majority of cases the contraventions were due to the obstruction of passages and staircases, due to the haphazard depositing of goods. This is a matter which occurs time after time and it is only when an accident or near accident occurs that serious thought is given to the consequence of such actions.

Dangerous Machinery (Sections 17, 18 & 19)

All dangerous parts of machinery must be securely fenced unless they are so placed or constructed as to be safe. No person under the age of 18 years may clean any machinery if this exposes him to any risk of injury and on certain machines an untrained person may not work unless under supervision.

I am pleased to report that only eight contraventions were found in which machinery was inadequately guarded. Occupiers are now more conscious of their responsibilities relating to the use of machines and are giving their staff better instruction in the necessary safety measures to be observed.

Power conveyors are now coming into use more and more in the larger stores and inspection while installation is taking place is carried out by the Senior Inspector to ensure that all safety factors are complied with. It is interesting to note that of the 26 accidents notified this year none have been caused by machinery.

Prohibition Of Heavy Work (Section 23)

No person may be required in the course of his work to lift, carry or move a load so heavy as to be likely to cause him injury.

Four injuries due to lifting were reported this year and all were investigated; none of the cases suggested that the weight lifted was excessive.

Accidents

No. of accidents reported ...	26
No. of accidents investigated	26

Causation

1. Falls of persons	
(a) on stairs	5
(b) tripping over stationary objects	5
(c) slipping	4
(d) from ladders and chairs	2
2. Dropping objects while handling struck by falling object	3
3. Striking stationary objects	2
4. Machinery	
(a) slicing machines	-
(b) other	-
5. Injuries due to lifting	4
6. Not otherwise stated	1

Injuries sustained

(a) fractures and dislocations	7
(b) sprains and strains	8
(c) internal injuries	-
(d) open wounds/surface injuries ...	6
(e) bruising and crushing	5
(f) burns	-
(g) multiple injuries	-

ACCIDENTS 1968

Class of Workplace	Adults 18 & over		Young Persons under 18		Total
	males	females	males	females	
Offices	1	0	0	0	1
Retail shops	4	10	0	2	16
Wholesale shops & warehouses	1	0	1	0	2
Catering establish-ments	1	6	0	0	7

2 formal and 2 informal warnings were given, but in no case was it necessary to institute proceedings.

26 accidents only were reported this year.

Liaison with the ambulance section is still maintained as a general check that notifications are being made as required by the Act.

Exemptions and Prosecutions

No exemptions were granted and no legal proceedings were taken.

TABLE I

REGISTRATIONS AND GENERAL INSPECTIONS

Class of Premises	No. of premises registered during the year	Total No. of registered premises at end of year	No. of premises receiving general inspection during the year
Offices	15	180	180
Retail Shops	50	738	588
Wholesale Shops	-	15	4
Catering Establish-ments	9	109	77
Fuel Storage Depots	-	1	1
Total	74	1,043	850

No. of visits of all kinds by inspectors to registered premises 1,256

"General inspection" means any inspection of premises to which the Act applies which is undertaken for the purpose of ascertaining whether all the relevant provisions of the Act and instruments thereunder are complied with regarding those premises. "Registered premises" means any premises in respect of which a notice under Section 49 of the Act has been received by a local authority and the expression "premises registered" shall be construed accordingly.

Class of Workplace	No. of persons employed
Offices	860
Retail Shops	2,801
Wholesale Departments, Warehouses	47
Catering Establishments - open to public	868
Canteens	1
Fuel Storage Depots	7
Total	4,584
Total Males	1,388
Total Females	3,196

Inspectors All the Public Health Inspectors are appointed under the Act.

It became necessary, due to increased responsibilities in other directions, to delegate additional duties to the Senior Inspector who has previously devoted the whole of his time to this Act. Assuming full establishment, therefore, eight Inspectors would carry out inspections under this Act in addition to their other duties.

TABLE II

PREMISES AT WHICH CONTRAVENTIONS FOUND

Class of Premises	
Offices	40
Retail Shops	154
Wholesale Shops & Warehouses	2
Catering Establishments and Canteens	14
Fuel Storage Depots	0
Total	210

PREMISES AT WHICH ALL CONTRAVENTIONS REMEDIED

Offices	23
Retail Shops	227
Wholesale Shops & Warehouses	4
Catering Establishments and Canteens	16
Fuel Storage Depots	0
Total	270

DETAILS OF CONTRAVENTIONS FOUND

Unregistered after verbal warning	18
Cleanliness	58
Overcrowding	3
Temperature	28
Ventilation	11
Lighting	6
Sanitary accommodation	47
Washing facilities	26
Drinking water	-
Clothing accommodation	2
Seating	4
Eating facilities	1
Floors, passages and stairs	45
Safety and operation of machinery	8
Noise and vibration	-
First aid facilities	67
Abstracts	56
Total	380

TABLE III

Contraventions found re:-	Year			
	1965	1966	1967	1968
1. Cleanliness	191	125	157	58
2. Temperature	387	260	91	28
3. Lighting	48	55	24	6
4. Sanitary conveniences	336	223	191	47
5. Washing facilities	171	80	44	26
6. Drinking water	11	4	1	-
7. Seating provision	29	11	4	4
8. Floors, passages, stairs	176	116	99	45
9. Guarding & operation of machinery	39	29	29	8
10. First aid equipment	348	314	135	67
No. of general inspections	6 73	829	1,066	850

ADMINISTRATION OF THE SHOPS ACT, 1950.

The number of routine visits to shops was 920 and 30 reinspections were made to secure abatement of the contraventions summarised in the following table.

Nature of Contraventions remedied	
Notice and documents provided	4
Hours of Employment	
Contraventions detected and remedied ...	Nil
Hours of Closing and Sunday trading	
Number of contraventions noted	5
Number of warnings issued	5
Number of prosecutions instituted ...	Nil

NOISE ABATEMENT

Work under this Act is undoubtedly increasing and is very time consuming. In general, noise created at night can be said to be the greatest source of complaint as it is at this time that normal background noise drops to a low level and the consequent greater differential between the noise under consideration and the background results in the noise being much more disturbing. This work now requires a considerable number of visits late at night and in the early hours of the morning, so much so that night visits now are invariably a circular tour of the various trouble spots rather than an isolated visit.

During the year 48 complaints were received regarding 29 noise sources alleged to be causing nuisance. The great majority of these sources (20) were industrial in origin, three were regarding commercial sources and the remaining six domestic.

Industrial

A factory was extended to within a few feet of a block of domestic property. A bank of plastic injection moulding machines was sited on the wall adjacent to the property and the company operated a night shift on this plant. The roof of the extension was of light construction and became the point of emission of a considerable level of noise. This when compared with the normal night background level in the area was considerably in excess of natural level and there was undoubtedly nuisance. Meetings with the factory management were held and consultants were employed by the factory on the advice of the department. A scheme of works of insulation was agreed jointly between the department and the consultants

and the factory agreed to carry out these works and it is anticipated that these will be completed early next year. Another factory was operating a steel cutting guillotine close to their boundary wall which, in turn, was close to domestic property. The guillotine was defective and this was aggravating the noise problem. An order was placed to replace the defective machine by a hydraulic one which would be considerably quieter in operation and it was also agreed that this be sited further away from the boundary wall (When carried out, this work achieved a reduction of 20 d B A on previously measured levels.)

Tunnel works still gave rise to a large number of complaints again principally relating to certain works and plant operating through the night. A set of compressors was provided with baffle walling, cement deliveries restricted to certain hours and alternative arrangements made for lorries to enter a site, all of which remedied nuisance to some complainants. Other problems however, were more intractable and these again involved transport and compacting of spoil to certain sites. It was impossible, in these instances, to reduce the noise at source or effectively insulate and the only remedies were - (a) to stop the night working completely, which would have had serious repercussions on the phasing and costs of the works or (b) to complete the works as quickly as possible. The latter course was followed.

Fan noise from several factories again gave rise to some complaints all related to night work and in all cases it was found possible to suspend the operation of the offending fans during the night.

Commercial

Complaints of noise from commercial sources included night taxi services and excessively loud music from amusement machines in New Brighton. Informal approaches resolved these matters without difficulty.

Domestic

Domestic complaints invariably relate to noisy neighbours, children, animals etc. and are more inclined to be private rather than public health nuisances. Often an informal approach by the department will help but if this proves unsuccessful a private action by the complainant is the solution.

WATER SUPPLY

The water supply for the borough is obtained from the Wirral Water Board, whose head office is at 69 Allport Road Bromborough.

Quantity

The total rate of consumption of water in the town was 43.2 gallons per head per day, of which 31.3 gallons was for domestic purposes and 11.9 gallons for industry and commerce.

Source and treatment

The water supply to the borough is obtained from three sources, Lake Alwen in North Wales, the River Dee and from deep boreholes within the area of supply. For distribution purposes the borough is divided into three zones - (1) Poulton, part of Seacombe, Leasowe and Moreton via Crosshill Reservoir; (2) Saughall Massie via Heswall Reservoir, and (3) the remainder of Wallasey via Gorsehill Reservoir.

The supply from Lake Alwen is treated at source by coagulation, filtration, pH correction and chloramine dosing. The River Dee supply receives similar treatment, except that sterilisation is by means of super-chlorination and that activated carbon and chlorine dioxide are used to control tests. The borehole supplies are chlorinated, but because of pressure of demand it has been necessary temporarily to discontinue softening. All new mains are treated with a solution of chlorine by means of a portable chlorinator. There are no houses in the borough without a piped supply, except six bungalows at "Castlefields", Leasowe Road, which are supplied by means of a standpipe.

The supply to the area has increased and this increase has had to be met in general by a greater proportion of borehole water from Seaview Road. Accordingly in the areas fed from Gorsehill Reservoir the average hardness has increased. The high output from the borehole source will have to continue until additional water from the River Dee can be supplied to the North end of the Wirral and when this work has been completed in 1970 the borehole supply will be stood down.

Chemical and Bacteriological Examination

Regular sampling both chemical and bacteriological is carried out by the Wirral Water Board throughout their chain of distribution.

The Public Health Inspectors also take random samples for examination and the results, all of which are satisfactory, are summarised below.

(i) Boreholes at Seaview Road.

No. of Organisms	No. of Samples		
	1 day at 37.oC.	B.Coli. (Type 1) per 100 mls.	Total Coli. organisms per 100 mls.
0	11	20	20
1-5	5	-	-
6-10	1	-	-
11-20	1	-	-
21-50	2	-	-
Over 50	-	-	-
	20	20	20

(ii) Random Distribution Points within the Town Area.

No. of Organisms	No. of Samples		
	1 day at 37oC.	B.Coli. (Type 1) per 100 mls.	Total Coli. organisms per 100 mls.
0	37	85	82
1-5	38	2	5
6-10	5	-	-
11-20	2	-	-
21-50	-	-	-
Over 50	5	-	-
	87	87	87

Typical Chemical Analyses

Town Area (Health Inspector's random sample)

Samples of water supplies were taken by Public Health Inspectors and submmitted for full chemical analysis. A typical result was as follows:-

Town Area

Analytical results expressed in parts per million:-

Total solid matter in solution	143
Oxygen required to oxidise in 15 minutes ...	0.40
4 hours	0.76
Ammoniacal Nitrogen as N	0.01
Albuminoid nitrogen as N	None
Nitrous nitrogen as N	None
Nitric Nitrogen as N	0.8
Combined Chlorine	23.1
Total Hardness	70.
Hardness (Carbonate)	37.5
Hardness (Non-Carbonate)	32.5
pH Value	7.3

Analyst's Comment

The water was clear and pale yellow. It only gave a few vegetable fibres and mineral particles in suspension. The water is quite suitable for drinking and domestic purposes.

Gorsehill Reservoir Outlet (Water Board Sample)

Turbidity (APHA units)	<2
Colour (Hazen)	6
pH	7
Free CO_2	20
Electric conductivity (Reciprocal megohms cm)	650
Chlorine present as Chloride	132
Alkalinity as $CaCO_3$	80
Hardness - Total	215
Carbonate	80
Non-carbonate	135
Nitrate Nitrogen	0.9
Nitrite Nitrogen	<0.01
Ammoniacal Nitrogen	0.03
Albuminoid Nitrogen	0.08
Oxygen absorbed	0.3
Residual Chlorine	0.20
Metals - Iron	0.03
Manganese	<0.02

The water supply of the area has been satisfactory both as to quality and quantity. Hardness has been the source of complaint from some areas of the town but the reason for this is commented on earlier and the situation should return to normal in the fairly near future. The water is not plumbo solvent and the fluoride content for all sources is less than 0.1 parts per million.

SEWERAGE AND DRAINAGE

House Drainage

Visits by public health inspectors	460
Drains cleansed from obstruction after service of notice	87
Drains repaired or renewed	13
Drain Tests	14

The following sewerage works have been carried out during the year:-

1. A Pumping Station with two 4" pumps has been constructed to relieve flooding in a part of Mosslands Drive.

2. The construction of a 9" diameter relief sewer in Urmson Road to relieve a flooding problem which has affected a few properties in Urmson Road for a number of years.

3. A section of the surface water sewer in the Leasowe Road has been renewed during carriageway dualling works.

The Minister has approved the North Wirral Area Drainage Scheme subject to certain investigations being made regarding infiltration to the existing sewers. The Ministry are now satisfied on this point and tender documents are being prepared by the consultants.

RODENT CONTROL

Sewer Treatment

It was decided this year for the first time to use fluoracetamide in the poison treatment of the sewers. This is a direct poison requiring only one lifting of each manhole cover. It is, however, imperative that every manhole is treated in the area decided upon and based on records over the past three years an area where the sewer rat population had been most persistent was selected. A total of 1,201 manholes were poison baited. Due to staff difficulties it was not possible to commence the treatment until November.

Surface Infestations

In total 3660 visits were made during the year in the surface control of rodents arising from both complaints and other reasons. Warfarin is the poison used in all surface treatments. Further details in the form required by the Ministry are appended as follows:-

Properties other than Sewers	Type of Property	
	Non Agricultural	Agricultural
1. Number of properties in district	37,521	42
2. A Total number of properties (including nearby premises) inspected following notification	395	-
B Number infested by		
(i) Rats	139	-
(ii) Mice	209	-
3. A Total number of properties inspected for rats and/or mice for reasons other than notification	21	-
B Number infested by		
(i) Rats	15	-
(ii) Mice	2	-

PUBLIC HEALTH CONTROL OF SWIMMING BATHS

Swimming facilities in Wallasey include the indoor baths at Guinea Gap, the outdoor pools at New Brighton and Harrison Drive. In each case sea water is used, the water being pumped from the River Mersey for Guinea Gap Baths, from the Marine Lake for New Brighton Pool and from the Irish Sea for the Derby Bathing Pool. During operation, the swimming water undergoes a constant filtration process utilising Bell's Gravity Filters and modern chlorination equipment is used to ensure a safe and sterile water. The turnover period at Guinea Gap is once every three hours and at the two outdoor pools once every five hours. Guinea Gap Baths remain open for public use throughout the year and the water is heated; the two outdoor pools are only in use during the summer months and the water is not heated.

63 visits of inspection were made to the Council's swimming baths by the public health inspectors. Samples for bacteriological examination numbered 88.

Readings of chlorine levels at all the pools are taken regularly by the public health inspectors and these proved satisfactory in all cases.

Derby Pool

No. of Organisms	No. of Samples		
	1 day at 37.oC.	B.Coli. (Type 1) per 100 mls.	Total Coli. organisms per 100 mls.
0	10	14	14
1-5	4	-	-
6-10	-	-	-
11-20	-	-	-
21-50	-	-	-
Over 50	-	-	-
	14	14	14

New Brighton Pool

No. of Organisms	No. of Samples		
	1 day at 37oC.	B.Coli. (Type 1) per 100 mls.	Total Coli. organisms per 100 mls.
0	13	16	16
1-5	2	-	-
6-10	1	-	-
11-20	-	-	-
21-50	-	-	-
Over 50	-	-	-
	16	16	16

Guinea Gap Baths (2 Pools)

No. of Organisms	No. of Samples		
	1 day at 37oC.	B.Coli. (Type 1) per 100 mls.	Total Coli. organisms per 100 mls.
0	27	55	55
1-5	19	2	2
6-10	3	1	1
11-20	4	-	-
21-50	5	-	-
Over 50	-	-	-
	58	58	58

Chemical Examination - Specimen Analysis (Guinea Gap No. 2 Bath).

Analytical results expressed in parts per million:-

Total solid matter in solution	24872
Oxygen required to oxidise in 15 minutes ...	0.28
4 hours	0.56
Albuminoid nitrogen as N	0.12
Ammoniacal nitrogen as N	0.11
Nitrous nitrogen as N	slight trace
Nitric nitrogen as N	5.2
Combined chlorine	12638
Free Chlorine	0.09
pH Value	7.3

This water is quite satisfactory for bathing purposes.

AIR POLLUTION

Summary of Observations and Visits

Clean Air

Industrial Observations	99
Industrial Visits	150
Domestic Observations	457
Domestic Visits	283
Other Visits to Smoke Control Areas	1,339
Other Visits to Proposed Smoke Control ... Areas	4,909
Visits to Volumetric Instruments	1,047

Measurement of Air Pollution

Four volumetric smoke and sulphur dioxide instruments continued to be operated by the inspectorate. These are situated at the Eastway Day Nursery Moreton; Fire Station, Liscard; Water Department, Seaview Road and Gorsedale Road School, Seacombe. The department's measurements are used in the national survey of air pollution, and it is pleasing to record that the inspectorate were congratulated by the Ministry of Technology on their excellent work in this connection.

SMOKE CONTROL AREAS

Good progress has been maintained in this field. One further area (No.13 Saughall Massie) comprising 1698 premises became operative on the 1st. October.

The thirteen operative areas cover just over 70% of the houses in the Borough.

The Survey of the No.14 (Belvidere) area comprising 2,708 premises was duly completed and the order made by the Council. This order was submitted for confirmation by the Minister late in the year.

Contraventions

Routine observations were made during the year in the operative areas to secure compliance with the orders. As a result of observations 57 warning letters were sent to occupiers of houses in the areas.

The nature of the various offences was as follows:-

Burning Coal	53
Burning Wood	4

Legal proceedings were instituted against four occupiers, all of whom had been previously warned.

All the cases were proved and a total of £8 in fines was imposed.

SMOKE CONTROL AREAS.

Order No.	Name and Date	Acres	No. of dwellings	No. of Other Premises	Date of Operation	Stage of Development
1.	The Wallasey (Church St.) Smoke Control Order No. 1. 1958.	11	271	4	1.10.1959	Operative
2.	The Wallasey (Moreton) Smoke Control Order No. 2. 1959.	125	1,070	25	1. 9.1960	Operative
3.	The Wallasey (Upton Rd.) Smoke Control Order No. 3. 1959.	31	241	6	1.10.1960	Operative
4.	The Wallasey (Fender Lane) Smoke Control Order No. 4. 1960.	340	635	1	1. 2.1961	Operative
5.	The Wallasey (Brighton St.) Smoke Control Order No. 5. 1960.	107	1,679	241	1. 5.1962	Operative
6.	The Wallasey (Leasowe) Smoke Control Order No. 6. 1960.	1,920	3,390	70	1. 9.1962	Operative
7.	The Wallasey (Seacombe/Poulton) Smoke Control Order No.7.1961.	710	6,058	482	1. 7.1964	Operative
8.	The Wallasey (Lingham Lane)Smoke Control Order No. 8. 1962.	335	1,581	30	1. 9.1963	Operative
9.	The Wallasey (Upton Park) Smoke Control Order No. 9. 1962.	93	36	-	1. 5.1963	Operative
10.	The Wallasey (New Brighton)Smoke Control Order No.10. 1963.	329	2,683	342	1. 7.1965	Operative
11.	The Wallasey (Breck Road) Smoke Control Order No.11. 1965.	240	1,787	111	1.10.1966	Operative
12.	The Wallasey (Warren) Smoke Control Order No.12. 1966.	398	1,752	63	1.10.1967	Operative
13.	The Wallasey (Saughall Massie) Smoke Control Order No. 13. 1967.	344	1,579	119	1.10.1968	Operative
14.	The Wallasey (Belvidere) Proposed S.C.O. No. 14.	260	2,559	149	-	Submitted for confirmation.

DISINFESTATION

There was a slight increase over last year the demands on this service being very heavy. A higher standard of personal hygiene together with the availability of expert services has reduced the incidence of such vermin as bed bugs and fleas to a low level.

Other insects, such as the clover mite cause considerable nuisance to householders, as new housing estates are built on their natural habitat. The insects most commonly dealt with during the year were cockroaches and ants. The department dealt with many instances of wasps' nests in and around private residences during the year. Wallasey, in common with many other authorities provide this as a free service and it is much appreciated by affected households.

Inspections following complaint

(1) No. of private houses inspected	63
(2) No. of local authority houses inspected ...	62
(3) No. of premises other than dwelling houses inspected	44
(4) *No. of premises showing infestations of:	
(a) Bed Bugs	24
(b) Fleas	24
(c) Cockroaches	66
(d) Ants	37
(e) Clover mite	3
(f) Others	29

*Occasionally premises are found to be infested with more than one type of insect.

Treatment by Council's Operative

No. of treatments commenced	169
No. of treatment revisits	214
completed	153

Disinfection.

No. of visits	6

RAG FLOCK AND OTHER FILLING MATERIALS ACT.

No samples of this material were taken during the year.

CONTROL OF CAMPING

21 visits were made to licensed sites during the year.

Six private sites were licensed, from the end of March until the first week in October. In addition to the above a branch of the Caravan Club held a camp on land situated on the promenade which is owned by the Corporation.

No. of sites licenced for tents during 1968 ...	2
No. of sites licenced for caravans during 1968	4
No. of cases of unlicenced camping detected during 1968	3
No. of visits to unlicensed land	31
No. of visits to licenced land	76

NURSING HOMES

OLD PERSONS' HOMES

CHILDREN'S NURSERIES

All the above classes of premises require registration by the Local Authority and the department makes inspections and recommendations to ensure suitable environmental conditions at premises which are the subject of an application for registration.

Eleven such reports were made during the year on proposals to establish two old persons' homes and nine day nurseries.

KEEPING OF ANIMALS AND PET SHOPS

The total number of pet shops is 8. All the licences are subject to standard conditions approved by the Council regard having been paid to recommendations of the Association of Municipal Corporations and the R.S.P.C.A.

Visits to pet shops	51
Visits to other premises	6
Animal nuisances abated	Nil

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

The Act requires the licensing of premises used for the boarding of animals. Two such premises were licensed during the year.

MISCELLANEOUS INSPECTIONS

Schools	14
Cinemas, dance halls, etc	18
Public conveniences	20
Local Land Charges (search)	2,437
Measurements of rooms for permitted numbers	246
Interviews with building contractors	160
Other visits	4,993

WALLASEY CORPORATION ACT, 1958

Registration of Hairdressers

During the year 11 applications were granted for the registration of premises for use as hairdressing establishments, there being a total of 163 premises registered within the Borough.

Bye-laws to govern the cleanliness of premises, equipment and operatives are in operation.

PUBLIC HEALTH ACTS AMENDMENTS ACT, 1907

Female Domestic Servants' Registry

No applications were received during the year.

COMMON LODGING HOUSES

There are no common lodging houses in the Borough.

THEATRICAL EMPLOYERS REGISTRATION ACT, 1925.

No. applications for registration were received during the year.

REPORT OF MR. J. W. PRICE, CHIEF INSPECTOR OF WEIGHTS AND MEASURES, RELATING TO:—

FOOD AND DRUGS ACT

A total of 348 samples of foods were obtained during the year.

All milk samples were genuine, although in one case milk supplied by a complainant was unsatisfactory as reported below. Ordinary milk averaged 3.58% of fat and 8.76% of non-fatty solids. For Channel Island Milk the average was fat 4.58% and non-fatty solids 9.24%. All milk samples were free from any anti-biotic substances.

6 samples were examined for pesticide and chemical residues; a negative result was found in all tests.

Samples adversely reported were:-

Milk deficient in fat	Sample from a complainant. Further samples genuine.
Orange Ice Lolly deficient in orange juice	Contained 1%, should contain at least 5%. Cautioned.
Cheese Slices	Consisted of processed cheese, should have been labelled accordingly. Sellers cautioned.
Cream of Tomato Soup deficient in fat	Contained 1.8% of edible fat. Code of Practice requires a minimum of 2.5% milk fat. Makers cautioned.

FERTILISERS AND FEEDING STUFFS ACT

Feeding Stuffs

10 samples genuine.	1 sample deficient in protein; the makers were cautioned.

Fertilisers

8 samples genuine.	1 sample deficient in potash; the makers were cautioned.

PHARMACY AND POISONS ACT

Applications for re-registration	100
Applications for registration	6
Number of premises on register at 31.12.68.	106

Welfare Services

(National Assistance Act, 1948)

WELFARE SERVICES.

Residential Accommodation

The Homes for Old Persons were again full throughout the year. The eighth Home to be opened, a further 40-bedded one in Wallasey Village, came into operation towards the end of the year and was being filled as quickly as practicable.

At the end of the year there were 158 persons on the Waiting List for accommodation in the Homes, compared with 249 at the beginning.

The following are the statistics relating to accommodation provided by or on behalf of the Council in 1968.

	Number resident on 1.1.68	Admissions during 1968	Discharges during 1968	Number resident on 31.12.68
"Lamorna"	19	13	14	18
"Redcliffe"	18	16	18	16
"Newholme"	38	17	15	40
"Manor Grange"	17	12	13	16
"Fernleigh"	65	113	112	66
"Osborne House"	39	38	33	44
"Seacombe House"	39	19	20	38
"Granville House"	-	37	4	33
David Lewis Colony	2	-	-	2
Home for Epileptics, Maghull	7	1	1	7
Langho Epileptic Colony, Blackburn	1	-	-	1
Turner Memorial Home, Liverpool	3	-	-	3
Wicksted Hall, Whitchurch	1	1	-	2
Leeds House, New Brighton	3	-	2	1
"Springhill" Nelson	1	-	-	1
Tithebarn Home, Crosby	1	-	-	1
Cheshire C.C. "The Rookery"	1	-	-	1
Cheshire C.C. Sutton Beeches	-	1	-	1
Charles Best House, Parkgate	1	1	2	-
Cressingham House, Wallasey	3	2	1	4
Daresbury Hall, Warrington	2	-	-	2
Catholic Blind Institute, Liverpool	1	-	-	1
Lancs. C.C. Peterfield House	1	-	-	1
Chester C.C. Kinderley House	1	-	-	1
St. Clare's Convent, St. Asaph	2	-	-	2
Spastics Society, Angers House	1	1	1	1
Hill Homes, Delia Grotten, Highgate	1	-	-	1
Salvation Army, Orrell Hey, Bootle	2	-	1	1
Nazareth House, Wrexham	1	-	1	-
Alexian Bros., Manchester	1	-	1	-
British Legion, Lister House	-	2	1	1
Manchester Family Help Unit for Spastics, "Southfield"	-	1	-	1
Cripples Help Society, "Tan-y-Bryn"	-	1	-	1
	272	276	241	307

Temporary Accommodation	Number resident at 1.1.68	Admissions during 1968	Discharges during 1968	Number resident at 31.12.68
Reception Centre, 51, Martins Lane	10	85	82	13
4, Tower Street	2	-	2	-
8, Tower Street	3	-	3	-
1a, Hope Street	8	-	-	8
15, Percy Road	11	-	-	11
18, Egerton Grove	5	-	-	5
17, Winford Street	4	-	4	-
19, Winford Street	4	-	4	-
221, Church Street	10	-	10	-
146, Falkland Road	-	-	-	-
53, Orton Road	6	-	-	6
84, Littledale Road	6	6	6	6
75, Withens Lane	8	-	-	8
116, Liscard Road	8	-	-	8
2, Wilton Street Ground Floor	4	-	-	4
2, Wilton Street First Floor	5	-	-	5
8, Beatrice Street	10	-	-	10
14, Water Street	5	-	-	5
90, Clarendon Road	15	-	15	-
1, Westminster Road	12	-	-	12
102, Poulton Road	4	-	-	4
104, Poulton Road	-	3	-	3
106, Poulton Road	6	-	-	6
80, Liscard Road	10	-	-	10
19, Cecil Road	5	-	-	5
10, The Grove	-	10	-	10

Rehabilitation Work

85 people have been admitted to the Reception Centre during the 12 months - 6 of these families have been re-housed privately and 2 families housed in Welfare property, 3 families have been re-housed from intermediate accommodation into Council property.

20 families living in Part III Accommodation have improved in behaviour and household management.

The number of cases requiring supervision has increased from 295 to 443, this does not include the heavy volume of daily enquiries for help and advice.

The general public give freely gifts of furniture and clothing, but the demand still exceeds the supply.

Private Landlords and Estate Agents are most co-operative in providing accommodation, when available, for families but it is increasingly difficult in finding accommodation where children are accepted.

It is helpful to have the co-operation of the County Court as cases are brought to light before reaching eviction stage, and providing these cases are supervised by this Department, suitable arrangements are made re mortgage, and rent arrears.

The co-operation of all Departments within the Local Authority and Voluntary Organisations is greatly appreciated by the Welfare Officer for Rehabilitation Work.

Registration of Old Persons' Homes

There were at the end of 1968, seven Homes in Wallasey registered under the provisions of the National Assistance Act, 1948; one new registration was made. These Homes are visited regularly by Welfare Officers to see that the National Assistance (Conduct of Homes) Regulations, 1962, are complied with.

Removal of Persons in Need of Care And Attention (Section 47 National Assistance Act, 1948)

During the year under the above Act, one man and one woman were admitted from their own homes to Corporation Homes for Old Persons.

Burial Of The Dead

During the year under Section 50 of the National Assistance Act, 8 burials were arranged in cases where it appeared that no suitable arrangements for the burial had been or were being made.

The costs of 5 were completely recovered, one almost completely recovered. It was not possible to recover any costs for the remaining two.

Protection Of Property

It is the duty of the Welfare Committee to ensure the safety of moveable property of persons when they enter Homes or Hospitals if no other suitable arrangements are being made. This entails notifying the Police that the house is empty, checking that doors and windows are secure and possibly taking into protection valuables, cash or furniture.

All items except cash are stored in Welfare Committee premises small items of value being kept in a safe. Cash is handed to the Borough Treasurer who places it in Suspense Account.

Occasionally advice is given to the relatives of mental patients on the procedure to be adopted when applying for appointment as Receiver of the patient's Estate.

The Court of Protection and the Official Solicitor are notified of cases which may be their concern. Both bodies are given any assistance they require in dealing with these cases.

Recovery Of Expenses From Persons Liable To Maintain Dependents

It has not been necessary to apply to the Petty Sessional Court for any recovery of expenses during the year.

Entertainments And Outings

The Old Peoples' annual coach outing was again round the Wirral, with tea taken at an Hotel.

Christmastime was made as enjoyable as possible for the residents of the Homes with all the usual Christmas fare and trimmings.

Throughout the year Schools, Churches, etc., and private individuals donated gifts of flowers, fruit and other articles for use by the residents. These were gratefully accepted.

Community Welfare

Community care means the care of people otherwise than in Institutions, and it is thought to be a better way of caring for the aged because it encourages continued independence and self-help, and the aged persons emotional needs of affection and interest from relatives and friends are more easily satisfied in their own homes, and it is of course more economical than maintenance in a Local Authority Home.

The first line of support in the community is the family, and that is considered to be the best form of Community care where the aged person either lives with his/her own children or receives regular daily visits and care from his/her own relatives.

The family itself needs the full support of the Local Authority Domiciliary Services, financial assistance and medical attention being provided by the Department of Health and Social Security.

The District Nursing Service made 41,069 visits to 1,203 persons over the age of 65 years during 1968, and the Home Help Service devoted 115,575 hours to the care of the aged in the Borough.

The Women's Royal Voluntary Service delivered 32,128 meals to housebound aged people and the Wallasey Voluntary Old Peoples' Welfare Committee members visited the lonely and provided extra comfort.

Meals provided in the Hostels for the Aged people living in the community amounted to 7,225 dinners throughout the year. This includes 4,046 dinners provided at the Lunch Club situated at "Seacombe House". The Lunch Club run by the W.R.V.S. in Mill Lane catered for 2,508 meals during the same period.

The Libraries offer services to elderly and housebound readers. The service to the housebound is on a fortnightly basis. Books for 7 of the 8 Old Persons' Homes are delivered when the Matrons contact the library for a fresh supply and a fortnightly call is made at the 8th Home. The average weekly issue of books to the elderly and housebound was 134.

The four Welfare Officers were busy throughout the year, and there was a marked increase in the applications for admission to Residential Homes.

The main source of referral are General Practitioners Hospitals, Voluntary Organisations, District Nursing Service, relatives and direct application by the aged persons concerned.

There were 115 women and 43 men on the Waiting List on the 31st December, 1968.

The Waiting List changes daily, new cases being added others being removed, and it is surprising how steady the total number remains when the considerable number of changes is taken into account. Publicity or the opening of a new Home always increases the number of enquiries.

The Welfare Officers visit and give information to the aged of services available and arrange for the provision of domiciliary services, such as Home Help, Meals-on-Wheels, District Nurse, Chiropody Service, or Voluntary Visitor, which may enable old persons to continue living in their own homes. The Welfare Officers provide the link between the services available and the aged person in need, and they are the focal point in community care.

BLIND WELFARE

Registration of Blind Persons

During the 12 months ending 31st December, 1968, 73 people were examined by Mr. W.D.Hamilton, Ophthalmic Surgeon, of these 43 were registered blind and 30 placed on the Partially Sighted Register.

Of the 43 registered blind, blindness occurred in the following age groups.

Age Group	Males	Females
1	-	-
2	-	1
3	-	-
4	-	-
5 - 10	-	-
11 - 15	-	-
16 - 20	1	-
21 - 29	-	-
30 - 39	-	-
40 - 49	1	-
50 - 59	-	1
60 - 64	-	1
65 - 69	2	3
70 - 79	3	16
80 - 84	3	3
85 - 89	-	6
90 and over	1	1
	11	32

Statement Re Incidence Of Blindness In Registered New Cases

	Glaucoma	Cataract	Others
1. Number of cases registered during the year for whom the following is recommended:			
(a) No Treatment	2	8	22
(b) Treatment (medical surgical, optical)	1	3	7
2. Number of cases registered during the year at (a) and (b) above which on follow-up action have received treatment	1	1	5

	Ophthalmia Neonatorum
1. Total number of cases notified during the year.	NIL
2. Number of cases in which -	
(a) Vision lost	
(b) Vision impaired	
(c) Treatment continuing at end of year	

	Males	Females	Total
Number on Register at 1.1.68	116	186	302
Number added during the year -			
New Cases	11	32	43
Transfers from other areas	1	3	4
	128	221	349
Less number of removals from register owing to -			
Leaving Wallasey	5	3	8
Deaths	8	20	28
	13	23	36
	115	198	313

During the year the Social Welfare Officers of the Blind made a total of 2,662 visits to Blind Persons and 452 visits to Partially Sighted Persons within the Borough, supervising their general welfare, ensuring that the correct statutory benefits were being received, and arranging for the provision of other services where necessary. The staff is comprised of 2 full-time and 2 part-time certificated Officers.

Craft Classes

In the Moreton area the number of persons attending the Tuesday afternoon class continues to increase, this will no doubt be the case for a number of years owing to the fact of Moreton being a developing part of the Borough. This class is held in the purpose-built Craft Room situated within the Borough Buildings, Oakenholt Road.

The Wednesday afternoon and Thursday evening classes were held at the Penkett Road premises until September when these premises were closed down. In September the classes were transferred to the new purpose-built Centre in Cambridge Road, both these classes continue to be well attended.

The Crafts taught at each of the classes include, Basketry, chair-caning, stool-seating, rug making, hand-knitting etc.,

Articles made at the classes were exhibited and sold at the Annual Gala in Cenetral Park in July, and also at

the Exhibition and Sale of Work held in November at the A.B.C. Cinema, Liscard, the latter being by kind permission of the Manager, Mr. Roberts.

A very successful Christmas Sale was held for the first time at the premises used by the Moreton area craft class.

Social Afternoons

Social afternoons are held on alternate Fridays at the Cambridge Road Centre. Grateful thanks are due to the many artists who voluntarily give of their time to entertain at these Socials.

Outings

A full day Outing took place in July, the venue being Llanerch Deer Park, St. Asaph for lunch, afterwards continuing on to Llandudno for tea.

Approximately 180 blind and partially sighted persons, some with guides, came on the Outing. The Coaches in which they were travelling were visited at the outset by His Worship the Mayor and the Mayoress, who extended their best wishes for a happy day.

Once again a half-day Outing was held for the benefit of those persons who find a full day too long and tiring; the party went to Southport, approximately 50 persons taking part.

In December a Christmas Dinner was held at the Riverside Restauant, New Brighton. The number of persons attending this dinner was in the region of 250 and among the guests were His Worship the Mayor of Wallasey and the Mayoress accompanied by Mrs. Councillor A. Elliott, a member of the Welfare Committee.

General

Three blind persons - two male and one female - were recommended for rehabilitation during 1968, the lady attended the Social Rehabilitation Centre at Bridgnorth and gained great benefit from the course, the two males attended the Industrial Rehabilitation Centre at Torquay, both the males have been successfully placed in 'open industry' and are employed at Vauxhall Motors, Ellesmere Port.

A 17-year old female pupil at the Royal Normal College for the Blind was successful in obtaining her G.C.E. in four subjects.

A 2-year old baby girl who is both blind and mentally handicapped was admitted to the R.N.I.B. Sunshine Home at Birkdale, Southport.

The rental for Talking Book machines is now being paid for by the Welfare Committee.

Free Travel Vouchers

Free Travel Vouchers are still issued through the courtesy of the Wallasey Passenger Transport Committee to all registered Blind Persons, resident in the Borough.

The Crosville Motor Bus Company also allotted 17 free Passes. These facilities are gratefully appreciated by the recipients.

Voluntary Services

Grateful thanks are due to those organisations which have helped the blind persons of Wallasey by providing social and other events and other entertainments, and to individuals who have given other service in many and varied ways. It is with gratitude that we thank the ladies who have come along unfailingly to the Classes and socials to prepare the refreshments.

The Meals-on-Wheels Service excellently provided by the W.R.V.S. has continued to benefit a number of the blind and partially sighted persons within the Borough.

Many of the people who attended the Classes and Socials were very kindly brought to the Centre by voluntary transport and drivers to whom sincere thanks are extended.

WELFARE OF HANDICAPPED PERSONS

(Other than Blind and Partially Sighted)

During the year one Welfare Officer and one Welfare Assistant were employed for domiciliary visits to handicapped persons.

Personal and domestic aids continue to be supplied to individual cases to enable them to become more independent. Adaptations such as widening and fixing sliding doors, handrails, ramps etc., have been undertaken at both privately owned and Corporation properties. Concrete run-ways and motor crossings have been constructed to accommodate users of Ministry of Health invalid tricycles and mini-cars, together with other necessary alterations to existing premises. Aids and adaptations have been provided in 164 cases during the past 12 months.

Further War Pensioners and civilians have been supplied with mini-cars through the Ministry of Health. If no garage is available for these cars the Local Authority assists in procuring one.

Disabled Drivers Car Badges are obtainable on application to the Welfare Department.

A new Handicapped Persons Centre was opened in Cambridge Road in June, 1968, and a full-time driver has been obtained for a specially adapted bus with wheelchair lift etc., to transport the handicapped to and from this Centre and also to the one at Oakenholt Road, Moreton. A male and a female handicraft instructor are employed for the purpose of diversionary occupation for unemployed physically handicapped people. The average attendance at the Centres is 60 men and women above the age of 16, all with various disabilities. The men have a woodwork class in which they receive tuition in simple carpentry, and are occupied in team work with special tools. The ladies are occupied with basket and needlework. The Annual Exhibition and Sale of Work was held at the A.B.C. Cinema, Liscard, in November - several organisations for the Blind and Disabled taking part.

A Christmas party was arranged for those attending the Centres at the Riverside Restaurant, New Brighton.

The Rotary and Round Table organisations, together with individual voluntary transport workers provided cars to enable handicapped persons to attend various social outings throughout the year.

The W.R.V.S. also provide transport when requested on behalf of disabled persons, and their Meals-on-Wheels Service is beneficial to many handicapped housebound people. The Clothing Service is frequently called upon.

Financial assistance was provided to assist several disabled people to enjoy holidays during the summer months.

The Chiropody Service free or financially assisted according to circumstances, is available to handicapped persons on the recommendation of the General Practitioner.

Close touch is kept with statutory and voluntary organisations concerned with the welfare of the disabled in the area. The Domestic Home Help Service is particularly important to housebound severely disabled people who live alone.

Rehabilitation, Training and Employment

Courses of rehabilitation and training are provided by the Ministry of Labour and the day Centre at Aintree continues to prove beneficial to Wallasey men who are able to travel there each day without difficulty. The Courses help to build up a maximum degree of fitness, so restoring the mens confidence in their ability to get and keep a job after illness, injury or long unemployment.

The Remploy Factory, Poulton, gives employment to approximately 60 handicapped men and women from Birkenhead and Wallasey. Their products of candlewick articles and different types of bedding are in much demand. The employees are financially independent, working a five-day week most of them using invalid tricycles as their transport. They could not be employed in open industry.

The Anne Glassey Workshop receives an annual grant from the Wallasey Council and provides permanent employment for several patients who have recovered from Tuberculosis, in addition to their rehabilitation courses for other patients. Their products of machine knitted garments, Christmas Cards and Crackers, are well known in many areas.

The Sir Robert Jones Workshop, Liverpool, employs one Wallasey man (epileptic) as a Poster Compositor.

Voluntary Organisations for Disabled

The Liverpool Adult Deaf and Dumb Benevolent Society and the Catholic Deaf Society of St. Vincent de Paul receive a per capita grant from the Wallasey Council in respect of Wallasey deaf residents. The Social Centres at Princes Way Liverpool, and Ashville Road, Birkenhead, are well attended by deaf people from Merseyside.

The Wallasey Hard of Hearing Club meet every Monday evening at the Corporation Welfare Centre, Cambridge Road. It is an active club for the 30 members, and Outings and Social Evenings are arranged on their behalf.

The Wirral Invalid Tricycle Association hold their weekly meetings at the Welfare Centre. Motor Coach Outings and tricycle runs were successfully organised and the Annual Dinner were very well attended by over 100 disabled people as well as members of the Wallasey Council.

The Welfare Department is represented on the following Committees:-

The Liverpool Adult Deaf and Dumb Society
The Catholic Deaf Society of St. Vincent de Paul
The Liverpool Council of Social Service
The Wallasey Disablement Advisory Committee
The Wallasey Spastic Association
The Wirral Invalid Tricycle Association
The Wirral Branch of the Multiple Sclerosis Society

STATISTICS OF REGISTRATION

Registers of Handicapped Persons

		Under 16 years	16 - 64 years	65 years and over
General Classes	M	5	289	141
	F	-	213	181
Deaf without speech	M	-	20	4
	F	-	14	6
Deaf with speech	M	-	2	1
	F	-	4	5
Hard of Hearing	M	-	5	2
	F	-	4	8

TOTAL — 904

Included in the above figures are:-

		Employed	Unemployed	In Homes	Total
Spastics	M	3	3	2	
	F	6	8	3	25
Epileptics	M	8	11	5	
	F	2	6	5	37

COUNTY BOROUGH OF WALLASEY
EDUCATION COMMITTEE

REPORT

OF THE

Principal School Medical Officer
For the Year 1968

STAFF

Medical Officer of Health and Principal School Medical Officer: Dr. H.W.HALL, M.B., Ch.B., D.P.H.

Deputy Medical Officer of Health & Deputy Principal School Medical Officer: Dr. W.F.CHRISTIAN, M.B., Ch.B., D.P.H.

Assistant Medical Officers of Health and School Medical Officers:

Dr. E.J.O'REILLY, M.B., Ch.B., B.A.O. (retired 18.7.68)
Dr. ESME I. GRANT, M.R.C.S., L.R.C.P. (part-time sessional basis)
Dr. SHEILA BELL, M.B., Ch.B. (appointed 3.9.68)
Dr. RUTH MEACHIM, L.R.C.P. (E), L.R.C.S. (E), L.R.F.P. & S. (G) (appointed 22.5.68, part-time sessional basis)

Principal School Dental Officer:

Mr. W.J.MEAKIN, L.D.S., R.C.S.

School Dental Officers:

Mr. W.A.HENDERSON, L.D.S.
Mr. E.G.MASON, L.D.S.

Dental Surgery Assistants:

Mrs. U. BROWN
Mrs. A.HENDER
Mrs. K.MASON
Mrs. S.KAYE (resigned 31.7.68)
Mrs. W.A.HEYES (appointed 3.9.68)

Superintendent Health Visitor/School Nurse:

Mrs. K.SCHOFIELD, S.R.N., S.C.M., H.V. Certificate

Health Visitors/School Nurses:

Miss C.E.MURRELL, S.R.N., S.C.M., H.V. Certificate (retired 1.9.68)
Mrs. E.E.P. NOLAN, S.R.N., S.C.M., H.V. Certificate (part-time)
Mrs. W. DOVEY, S.R.N., S.C.M., H.V. Certificate
Miss M.E. ASPINALL, S.R.N., S.C.M., H.V. Certificate
Miss E.M. MORGAN, S.R.N., S.C.M., H.V. Certificate
Miss E. WHITBURN, S.R.N. S.C.M., H.V. Certificate
Miss K.E.HIGGINS, S.R.N., S.C.M., (Part 1), H.V. Certificate
Miss M. HUGHES, S.R.N., S.C.M., (Part 1), H.V. Certificate
Miss J. LITTLEMORE, S.R.N., S.C.M., H.V. Certificate
Miss P. REYNOLDS, S.R.N., S.C.M., (Part 1), H.V. Certificate
Mrs. M.J.GRIFFITHS. S.R.N., S.C.M., H.V. Certificate

Miss W. LACY, S.R.N., S.C.M., H.V. Certificate (appointed 1.1.68)
Mrs. E.E.BROWN, S.R.N., S.C.M., H.V. Certificate (apponited 22.1.68)
Mrs. A.P.MENET, S.R.N., (Part 1) H.V. Certificate (part-time)
Mrs. A.D.HUGHES, S.R.N., (resigned 2.6.68)
Mrs. P.I.WILSON, S.R.N., Q.I.D.N.S. (appointed 3.9.68)

Visiting Specialists:
Mr. J.D.ELLIOTT EDWARDS, M.B., Ch.B., D.O.M.S. (Ophthalmic Specialist)
Mr. J.C. SANDEMAN, M.B., F.S.A.C.S., F.R.C.S., F.R.C.S.E., M.Ch. Ortho. (Orthopaedic Specialist)

Dr. G. EGAN, M.D., Ch.B., D.P.M. (Psychiatrist)

Physiotherapists:
Mr. K. JONES, M.C.S.P.
Mrs. P.A. PENNY, M.C.S.P. (part-time)

Speech Therapists:
Mrs. M.B. Avison, L.C.S.T. (part-time) (resigned 22.3.68)
Mrs. M.A. Salsbury, L.C.S.T. (part-time) (appointed 3.9.68)

Educational Psychologist:
Mr. B.A.BOURNE, B.A.(Hons.) Cert. Ed. (appointed 1.8.68)

Social Worker:
Mrs. U. BARRETT-LENNARD, Diploma in Social Science

Administrative Staff:
Mr. W.R. KIDD
Mrs. B. RADCLIFFE
Mrs. E.E.HILL (part-time)
Mrs. L. NIXON (resigned 17.3.68)
Miss G.V.PRAX (appointed 18.3.68)
Mrs. B.H.MAUNDER (part-time)

Audiometrician:
Mrs. J.E. RODGERS (part-time)

Health Education Officer:
Dr. J. FERGUSSON, L.M.S.S.A., M.I.H.E., M.R.S.H., F.R.S.A. (part-time)

Town Hall.
Wallasey.

May, 1969.

To the Chairman and Members of the
Education Committee.

Ladies and Gentlemen,

I have pleasure in submitting my Report on the School Health Service for the year 1968.

Since my last Report Dr. E.J.O'Reilly, who had been School Medical Officer for the last 21 years, retired in July after completing a further twelve months' service with the Authority. The quiet efficient way in which he undertook his duties in the School Health Service will be greatly missed. We have been very fortunate in obtaining the services of Dr. Sheila Bell who has joined the Department in a full-time capacity. Unfortunately with Mrs. Avison resigning from her post as Speech Therapist there was a gap of nearly six months without any Speech Therapy, but Mrs. Salsbury who had recently come to reside in the Borough agreed to undertake part-time sessional work as from September.

With the opening of the new Elleray Park Day Special School for Physically Handicapped and Delicate Children in the autumn, Wallasey can take pride in the modern facilities which this new school now provides for its less fortunate handicapped children. More severely physically handicapped children can now be accommodated than was possible in the old building. With the progress in neo-natal surgery there will be a continuing need for the education, care and welfare of these children.

In February the new municipal South Annexe of the Town Hall was opened and this resulted in the Child Guidance Clinic moving into the same building as the Health, Welfare and Children's Departments. This has brought a closer link between these Departments. The staff have much appreciated this and it has made liaison much easier to achieve by all. The fact that all these services and the Education Department are now drawn together within the vicinity of the Town Hall must be of benefit to the public.

The Report contains the usual contributions from all those engaged in the various aspects of the School Health Service, together with the statistics of the work carried out.

Finally, I should like to thank all who have contributed to the work of this section of the Department and to acknowledge the support and co-operation of the Director of Education and his staff and the interest shown by the members of the Education Committee.

I am,

Your obedient Servant,

HOWARD W. HALL

Principal School Medical Officer.

ANNUAL REPORT—SCHOOL HEALTH SERVICE, 1968

Observations of Dr. Christian, Deputy Principal School Medical Officer:—

Staff:

During the year there were the following changes in the staffing position:—

Dr. O'Reilly, who had continued to serve as full-time Medical Officer after reaching the age of retirement in 1967, decided to retire in July of this year.

Dr. Grant who had resigned as full-time Medical Officer on the 31st October 1967 continued to undertake duties on a sessional basis for the authority throughout the year.

Dr. Meachim was engaged on a sessional basis from May.

Despite the great national shortage of doctors wishing to work in this field of medicine, a shortage which has no boubt been aggravated by the uncertainty regarding the future of local authority medical services, which has been occasioned by the recommendations of the Seebohm Report and the Ministry of Health's Green Paper, we were fortunate in being able to fill one of the full-time posts of Medical Officer. This post was filled by Dr. Sheila Bell in September. We still have a vacancy for a full-time Medical Officer (male) but are unlikely to find an applicant for the reasons stated above and so will need to maintain the services by continuing to employ doctors on a sessional basis.

We have been unable to fill the vacant full-time posts of physiotherapist and speech therapist in spite of repeated advertisements. Mrs. Penny, who does part-time physiotherapy for the authority, was able to increase her sessions from September; this has enabled more treatments to be given to the handicapped children at Elleray Park School. Mrs. Avison who had been our Speech Therapist for 9 years but who had found it necessary to reduce her full-time work to part-time sessions in 1966, left the district in March. Nearly six months elapsed before we were able to resume the service when Mrs. Salsbury commenced duty in Spetember on a part-time sessional basis.

Miss Murrell, Health Visitor/School Health Visitor, who had been with this authority since September 1947, retired in August after 21 years service. She will be greatly missed by the staff of the department and by the mothers on her district for whom she had been adviser and friend for so many years.

Mrs Hughes who had been appointed school nurse in December 1966 left in June. She will be greatly missed as she had established good relations with the staff of the schools allotted to her and was a conscientious worker.

Two Health Visitors/School Health Visitors were appointed in January to replace staff who had resigned the previous year. They are Miss W.Lacy and Mrs. E.E.Brown. Mrs. P.I.Wilson replaced Mrs. Hughes as School Nurse in September.

In the School Dental Service Mrs. S.Kaye resigned from her post of dental surgery assistant at the Moreton Dental Clinic at the end of July and was replaced by Mrs. W.A. Heyes who took up her appointment in September. In March Mrs. L.Nixon resigned from her post as clerk at the School Clinic, Merton Road, and was replaced by Miss G.V. Prax.

With the opening of the new Elleray Park Day Special School for the physically handicapped, which is designed to enable the more severely handicapped children to attend school, and with the increasing numbers of more severely handicapped children reaching school age, it was found necessary to appoint a nurse to the staff of the school, Mrs. P.A.Owen. She has been appointed in the first instance on a part-time basis, but as the numbers of severely handicapped increase, her services will be required full-time.

Liasion with Hospitals:

The school health visitors attended weekly at the hospital clinics of the specialists in children's diseases. At these clinics the health visitors are able to supply information concerning the social circumstances of the Wallasey children seen, and undertake follow-up of cases if requested. Each week the hospitals send us lists of children discharged, together with the diagnosis in each case. In cases of accidental poisoning, burns and accidents in the home, the health visitors will visit the homes to assess the home situation and give advice to the parents.

Following correspondence with Mr. Rickham, a surgeon who specialises in neonatal surgery, concerning the facilities which would be available at the new Elleray Park Day Special School for children with spina bifida, a conference was held in August in Dr. Hall's office. It

was attended by Mr. Rickham, Dr. Llewellin, paediatrician Clatterbridge Hospital, Mr. Williams, orthopaedic surgeon, Mr. Rowland, Director of Education, Mr. Ellison Headmaster Elleray Park Day Special School, Mr. Jones, physiotherapist to the School Health Service, Dr. Hall and myself. As a result of improvements in neonatal surgery many children born with spina bifida are now surviving who in years past would have died shortly after birth. Some of these children are severely handicapped and are now reaching school age. The purpose of the conference was to discuss the requirements in staff and equipment to cater for these handicapped children.

Liaison with General Practitioners:

All children requiring treatment for conditions other than ocular, orthopaedic or psychological defects are referred to their family doctors, unless the condition is of a minor nature and can be dealt with at the minor ailments clinics. As the authority employs its own consultants for ocular, orthopaedic and child guidance clinics, children with disorders of this nature are referred by the school medical officers directly to these clinics. In each case, however, the specialists findings are communicated to the family doctors so that they are aware of what has been recommended for their patients.

Medical Inspections:

The number of periodic medical inspections carried out during the year was as follows:—

Entrants	Leavers	Others
1,743	1,095	1,756

Special inspections (which include cases seen at school at the request of the staff or school nurse and cases seen for the first time by the school medical officer at the clinics) numbered 974 during the year.

Re-inspections (children noted at previous periodic inspections as suffering from some defect or disability which requires periodic review) numbered 196 during the year.

The general condition of pupils examined at routine inspections was as follows:—

	Number	%
Satisfactory	4,593	99.98
Unsatisfactory	1	00.02

The authority own two Day Special Schools; one for physically handicapped and one for educationally subnormal children. Before a child is admitted to a Special School he is formally ascertained by one of the medical officers on the staff as being in need of special education which cannot be satisfactorily provided in an ordinary day school. Elleray Park Day Special School is for physically handicapped and Claremount Day Special School is for educationally subnormal children. Both these special schools are visited once per month by Dr. Christian. The children at these two schools are regularly examined whilst they remain there. This closer medical supervision of the handicapped children is necessary to ensure that the measures prescribed to mitigate or alleviate the handicaps are being conscientiously followed by the parents, such as the regular wearing of hearing aids and spectacles; the regular attendance for physiotherapy of those children who suffer from disorders of locomotion and the regular attendance for speech therapy of those children with speech defects, etc.

As a result of these medical inspections a variety of medical and psychological conditions are discovered, some of which require immediate treatment, whilst others require to be kept under observation. The Tables on pages show the number of such defects found during the year.

All children seen at the intermediate inspections are tested with the Ishihara Charts to detect the presence of defective colour vision. Head Teachers are informed when a defect is found as this knowledge may be relevant in deciding on a career.

The facilities offered by the authority for the treatment of children with defects or handicaps at school clinics and elsewhere were listed for easy reference in the Annual Report for 1964 and 1965.

In view of the persistent shortage of health visitors due to retirement, sickness and unfilled vacancies, it is becoming difficult to carry out the essential cleaniness surveys in schools, and so it is not possible for the nurses to carry out regular foot surveys to detect and refer for treatment children with plantar warts. It is, therefore, highly desirable that teaching staff in charge of physical education should examine the feet of the children before they begin a P.E. session and exclude those with suspicious lesions. We hold regular weekly treatment sessions at Merton Road Clinic and fortnightly sessions at Moreton Clinic at which warts are treated by a variety of methods, including carbon dioxide snow.

Other duties of the medical staff which relate to school health are:—

Arranging a period of convalescence for debilitated children. Testing children in secondary schools for evidence of sensitivity to tuberculosis and vaccinating with B.C.G. vaccine those showing no sensitivity. Administering vaccines to protect children against diphtheria, whooping cough, tetanus, poliomyelitis and measles. Examining children who wish to take up employment out of school hours, to take part in entertainment, or to go to school camps. Examining candidates for teachers training colleges and teachers appointed to this authority who have not already been examined. Examining all persons employed in the school meals service who are concerned with the handling, preparation or cooking of food. Visiting in their own homes of children who are receiving home teaching under the provisions of Section 56 of the Education Act, 1944.

Finally, I would like to thank the teaching staff of the schools I have visited during the year for their assistance in ensuring that the programme of work ran smoothly.

Observations of Dr. Sheila Bell, School Medical Officer:-

In the 4 months I have been working with the Department I have been most impressed with the friendly and helpful attitude of the staff. There is no suggestion of a "bureaucratic attitude" to any of the problems that arise.

The standard of health amoungst the school children is generally high. There are quite a number of children with defects of vision and, I am afraid, some of the older boys and girls do not wear their spectacles in class when they should do.

We still, unfortunately, have small outbreaks of "dirty heads" in the Borough. These are dealt with promptly by the Health Visitors/School Health Visitors and in most cases with the co-operation of the mothers.

The problem of nocturnal enuresis remains, and though the electric alarm bell works wonders, in some cases there is a tendency for the child to relapse when it is removed. Another complaint is that it wakes the whole household as well as the child.

The routine audiometry examinations reveal a number of children whose hearing is, to varying degrees, subnormal. I examine all these children and find that many have chronically enlarged tonsils and adenoids and are on the waiting list at Victoria Central Hospital for tonsillectomy. It is unfortunate that this waiting list is so long. After the operation there is a dramatic improvement in hearing and general health in these children.

I have been giving the dental anaesthetics in the School Dental Clinics for many years and I am pleased to see the great increase in the amount of orthodontic work performed in the School Dental Clinics. It does not appear to worry children any longer if they have to wear a "brace" on their teeth.

I would like to thank the Head Teachers and staff for their co-operation and interest in our work.

Observations of Mr. J.C.Sandeman, Visiting Orthopeadic Specialist:—

For the year 1968, 1,000 cases were seen of which 375 were new children. The predominant malady continued to be foot complaints and it is interesting to note the higher incidence of lower limb abnormalities to be found in children in comparison with the trunk and upper limbs, which postulates the theory of development abnormalities occurring in the later development of the caudal segments of the body.

We have now divided the flat feet into four types. There is the long thin foot, a normal arch which is inclined to wear the inner side of the heel down due to a valgus roll of the foot as a whole, which has been quickly corrected using plastic heel seats which in themselves have caused a varus tilt and irritation to posterior tibial tendon with active correction of the faulty foot balance. In addition to these there are the valgus roll of the foot with low-arch and early break at the mid-tarsal joint which show as a break in the inside of the lasts of the shoes, together with wearing of the inside of the heels down, and in these cases heel seats combined with valgus strengthening have been efficacious. The true flat foot has presented in the main with a bulge and break in the mid-portion of the shoe along its medial border, and with absence of an arch on standing. As these are children these are in the main mobile feet. No congenital flat feet such as a vertical talus have been seen. The last type of peroneal spastic flat feet has presented on only one occasion.

The division of the flat feet into their different aetiological classifications has given satisfactory correction of the gait and shoe wear within nine months using heel seats in over 80% of cases. This has obviated the routine use of C. and E. heels which was more expensive, less efficient, and more time consuming.

Faulty toe alignment has in the main been confined to overriding little toes, hallux valgus and only one case of hallu rigidus being seen for the year. These have been asymptomatic. Surgical correction has not been advised. Club foot and pes cavus have been surprisingly uncommon with only one child in each category.

There have been the interesting border-line problems, where children are clumsy on their feet, and usually present as rapid and destructive shoe wear. It has been our common experience that this is associated with increased or even clonus like refle es and with normal Babinskie responses. While these are not definite cases of cerebral palsy, the altered central nervous reflex pattern demonstrates the border-line between the normal child and that of spastic paralysis.

Faulty leg alignment though while common has in the main corrected itself without altered footwear, providing the knock-knee has been of less than three finger intermalleolar distance for knock-knees, and two finger intercondylar distance for bow-legs. In those cases in which spontaneous correction has not occurred, night splints have been used and to date no operative interference has been necessary.

Of complaints confined to the knee joint, surgery has only been undertaken on one case which proved to be an osteochondritis dessicans.

Routine orthopaedic surveillance has been of value in several cases, such as scoliosis which had not been observed by the parents. The several cases which have been found are under observation to watch for deterioration of the curves, and in only one child has surgery been necessary. Of sterno-mastoid contractures with wry-neck, three children have needed muscle release, the others responding satisfactorily to intensive physiotherapy. One child with treated club foot was found to have temporary and slight alteration of lower limb reflexes, and in this case infection of a vertebral body was found on x-ray. Another with slipped epiphysis is at present under treatment.

At pre-school clinic there has been a singular absence of congenital dislocation of the hips, four cases

have presented with clicking hips but these have all been normal to x-ray and follow-up examination. One older child with a subluxated hip has been corrected by surgery.

The efficiency of the staff in the organisation of clinics together with follow-up and co-ordination with hospital bookings, admission to hospital and special investigations has not only been of an excellent calibre, but this has been the most pleasant staff it has been my pleasure to work with.

REPORT on the work of the Orthopaedic Clinic

Number of Sessions held at the Authority's Clinics	52
Number of New Cases	375
Number of Re-examinations..	624
Number of Cases discharged cured	93

atomical Classification Conditions	New Cases				Re-examinations				Discharged			
	Pre-Sch Age		School Age		Pre-Sch Age		School Age		Cured	Left	Treatment Refused	Died
	M.	F.	M.	F.	M.	F.	M.	F.				
ot	30	16	55	87	33	16	143	115	53	4	2	-
wer Limb	40	36	14	39	73	48	42	65	38	1	3	-
lvis	-	-	-	1	-	3	1	2	-	-	-	-
ine & Thorax	4	4	3	5	17	20	2	8	1	-	1	-
per Limb	-	-	1	2	1	-	2	2	-	-	-	-
oe & Skull	-	-	-	-	-	-	-	-	-	-	-	-
ntral Nervous stem	2	4	2	2	9	8	3	8	-	-	-	-
ner Conditions	2	1	-	3	-	1	1	1	1	-	-	-
thing Abnormal gnosed	7	4	7	4	-	-	-	-	-	-	-	-

Remarks of Mr. K. Jones, Physiotherapist:-

We were delighted to welcome Mr. John Sandeman as our visiting Consultant Orthopaedic Surgeon. Mr. Sandeman is a distinguished Research Fellow in Orthopaedic Surgery, and we hope he will enjoy a long and happy association with us.

With the opening of the new Elleray Park School for Physically Handicapped Children, a cloud, perhaps no bigger than a man's hand, looms on the horizon, namely the problem of spina bifida children. More and more of these children are surviving into childhood at least, as a result of improved surgical and post-natal techniques, and an ever increasing number of these children will, as they are admitted to Elleray Park School, require physiotherapy from the Authority's Staff. Their physical treatment, although not specialised in the way that that of cerebral palsy patients is specialised is, nevertheless, very time-consuming, and with our present depleted staff it is difficult to envisage how such treatment is to be provided. As I have remarked to one of the Consultants involved with this problem, the question is not one of elaborate equipment, but of trained physiotherapists with a paediatric bias - a rare breed. If the promised invasion occurs, the minimum requirement would be one full time physiotherapist at the school, with visits from a colleague. This would entail increasing the establishment of physiotherapists employed by the Authority from two full time therapists to three. The present department consists of one full time physiotherapist and one part time (4 half day sessions). It must be remembered that spina bifida children do not constitute the complete population of the school and the treatment of asthmatics, spastics and other disabled children cannot be neglected because of the appearance of a new problem.

PHYSIOTHERAPY REPORT, 1968

Total Cases on Register...	1,500
Attendances for Treatment	3,722
New Cases for Physiotherapy Treatment ...	172
Orthopaedic Cases of School Age treated ...	720
" " treated at School	13
New " " of School Age	165
" " " " " discharged	82
Number of heel seats fitted...	199

PHYSIOTHERAPY REPORT, 1968

	Visiting Orthopaedic Surgeon's Clinic			Artificial Sunlight Clinic		Asthma		Remedial Exs. incl Breathing Exes other than Asthma		Electrotherapy	
	New Pts.	Total Atts.	Disch.	New	No. Trts.	New	No. Trts.	New	No. Trts.	New	No. Trts.
January ..	28	87	4	8	239	-	15	14	72	4	26
February ..	26	54	3	6	197	-	16	3	140	3	24
March ..	35	73	8	7	250	-	18	4	99	4	26
April ..	24	66	8	7	206	3	12	6	98	6	25
May	47	116	19	6	285	-	26	5	141	2	24
June	26	68	9	4	196	1	11	6	114	3	26
July	21	81	7	-	64	-	14	4	43	3	22
August ..	29	81	5	-	-	-	-	-	36	-	-
September	28	78	8	10	152	2	15	11	108	4	21
October ..	43	117	10	5	189	1	12	6	171	5	30
November ..	30	90	7	5	221	-	31	7	57	3	23
December ..	38	88	5	-	116	-	15	2	80	2	46
TOTALS ..	375	999	93	58	2,115	7	185	68	1,159	39	293

CONSULTANT PSYCHIATRIST'S REPORT ON WORK AT CHILD GUIDANCE CLINIC, 1968

This has been a year of double distinction. In February, 1968, the Clinic premises moved from 120, Church Street, to the new Municipal Building. Reports of the recent past have had many hard things to say about the premises that we occupied in Church Street. It would be ungracious of us now not to express our appreciation of the premises into which we have moved in the Municipal Block. The contrast is so startling as to have left us almost disorientated to begin with. We have not only new buildings, good paintwork, and easy access; we have light, we have warmth and we have attractive new furniture. We have a new image which has renewed our dignity, and I hope it has renewed our enthusiasm for work. We appreciate, of course, that it is only temporary accommodation, as temporary tenants we are making do with some uncomfortable limitations, for instance, that our Consulting Room has to be shared by two members of the Team, Psychiatrist and Psychologist. It has proved a considerable advantage to be sited in the same building as the Children's Department. This allows for much more informal exchange of views and consultation with Officers of that Department, and it is to be hoped that this informality will develop further.

This year has also seen a dramatic increase in the new referrals; indeed a 48% jump on the average rate of referrals over the past six years. An increase of this kind is, of course, highly gratifying. For years I have commented in my reports on the low rate of referral from the Borough of Wallasey, as compared with the National average. 131 cases referred in one year to the Child Guidance Clinic catering for a total schoolchild population of 16,000 still represents less than 1%. Surveys of maladjustment in schoolchild populations over the country indicate a maladjustment rate of between 6% and 10%.

The fact that we have had this sudden and unexpected increase in new referrals has inevitably diminished the amount of time available for children already seen and taken on to our treatment schedule. It would be premature to make any alteration in our present scheme of things simply on the strength of one bumper year. Suffice to bear in mind that the more new cases referred the bigger will our case-load of treatment cases be. This may involve an increase either in the number of Psychiatrist's sessions to the Clinic or perhaps, preferably, the addition of a Play Therapist to our Team. The latter could only be contemplated after we have acquired further accommodation. A Play Therapist without a Play Therapy Room

would be an embarrassing redundancy. At this stage we are but thinking aloud as to what future recommendations may be made, but we are not as yet, making any solid recommendations.

This year also, has seen the arrival of a new Educational Psychologist to the Child Guidance Clinic Team. It has been a great delight to have Mr. Bourne join us. Already, he has stimulated many new interests in the Clinic. He brings to his work a lively enthusiasm as well as a healthy, critical approach. It might be appropriate to say again how much we have been indebted to the services of Mr. O'Brien during the interim period when we were without an Educational Psychologist.

EDUCATIONAL PSYCHOLOGIST'S REPORT ON THE WORK OF THE SCHOOL PSYCHOLOGICAL SERVICE, 1968

I joined the staff of the Wallasey Educational and Child Guidance Clinics on August 1st, 1968 and thus my report will necessarily include the invaluable work carried out by Mr. O'Brien, Remedial Teacher, over the months preceding my appointment.

In these hectic times, when all sectors of the community are being asked to increase their productivity ratings, both the Schools Psychological and Child Guidance Services can be said to have heeded the message. There has been an overall increase in referrals to both services in the past 12 months, of some 42% in the case of the School Psychological Service, and of 53% in the case of the Child Guidance Clinic, over the previous year 1967. One trusts that such an increase signifies an increasing awareness both in schools and in the community at large, of the services which are provided for the benefit of parents, children and school teachers alike.

Of course, such services as the School Psychological Service and the Child Guidance Service, must be judged in the final analysis by the practical help which can be given to those children in need, be it of an educational or a psychiatric nature. Certainly, the percentage of cases categorised as "improved" from the psychiatric viewpoint, demonstrates the degree of success of this half of the Clinic's services, but in the case of the School Psychological service, it is not so easy to assess the benefits which accrue. From the standpoint of those children assessed as in need of Special Education, one can witness at first hand the progress which results from the devoted attention which children receive in Clare Mount School, but for the children tested at the Clinic for educational reasons and found to be in need of remedial help in their ordinary school, then one recognises

the limitations of the help which can at present be given from the School Psychological Service. Mr. O'Brien, our Remedial Teacher, has struggled admirably in an effort to provide for the pressing needs of those children, who, despite the considerable efforts of their Class Teachers, have failed to make adequate progress with reading in a normal class. An extension of this essential facet of the School Psychological Service would be of the greatest value to these children.

In line with the recommendations of such reports as the Summerfield, the Plowden and the Sheldon Reports, it is gratifying to be able to report that the number of referrals to both the Child Guidance Clinic and School Psychological Services between the ages of 4 to 7, has again shown a welcome increase; the wisdom of early assessment and preventative action, is now being increasingly recognised in all quarters. In this regard the proposed Assessment Centres which it is hoped to establish should reinforce this emphasis upon early prevention rather than the later, more costly cure. One trusts that this tendency of early referral will continue to increase in the forthcoming year.

Mrs. Barrett-Lennard, Social Worker, continues to carry out the indispensible home visits which, in the interim between treatments in the Child Guidance Clinic, provide sensitive indications of the progress of our cases. In addition, of course, she has interviewed the parents of children seen for psychiatric or educational advice in the Clinic, and also continues to liaise with the schools and all other social work agencies in the Borough. Hardly a week passes when Mrs. Barrett Lennard is not talking to local organisations regarding our Service, or family life in the U.S.A. following her Winston Churchill Fellowship. She receives regularly, valuable up-to-date documents relating to our work from her contacts overseas. Mrs. Barrett-Lennard continues to serve on the Executive Committee of the British Association of Social Workers, Merseyside Branch, where the meetings have included among other topics , discussions on the Seebohm Report.

An analysis of the work of the Clinic is made below:-

CASES REFERRED

Current cases, 1st January, 1968.		47
To be reviewed		0
New Cases.	1968.	121
Cases re-opened.	1968.	10
		178

The new cases and cases re-opened were referred from the following sources, through either the Director of Education or the Principal School Medical Officer:-

Head Teachers	56
Parents	22
Family Doctor	21
Medical Officer of Health	2
Deputy Principal School Medical Officer	14
Director of Education	2
Child Care Officers	5
Health Visitors	4
Probation Officers	2
Speech Therapist	2
Consultant Psychiatrist	1
	131

The disposal of the cases dealt with during the year falls under the following headings:-

Cases Closed during 1968		110
Improved	62	
Report and advice only	37	
Failed to co-operate	3	
Left the district	3	
Transferred to V.C.H.	1	
Into Care	3	
Approved School	1	
Current Cases at 1.1.69.		68
		178

The diagnoses of cases referred during 1968 are classified below:—

Behaviour disorders	41
Delinquent tendencies	21
Emotional instability	29
School refusal	12
Habit disorders	9
Pre-school advice	9
Educational advice	5
Educational retardation	2
Epilepsy	2
Speech disorder	1
	131

Referrals by age to both the Child Guidance Clinic and the School Psychological Service, (i.e. registered cases.)

Age	Child Guidance	Educational
Pre-school	9	1
5-6	7	0
6-7	15	13
7-8	15	11
8-9	12	7
9-10	13	7
10-11	11	6
11-12	13	2
12-13	8	2
13-14	12	0
14-15	8	0
15-16	2	0
16-18	1	0
	126	49

The work of the Psychiatrist, Psychologist, Social Worker and Remedial Teacher is set out in the following tables:—

Psychiatrist:

New Case Diagnostic Interviews	121
Re-opened Case Interviews	10
Treatments	102
	233

Psychologist (as from 1st August)

Psychological Tests and Interviews (Clinic)	51
Psychological Tests and Interviews (Schools)	18
Psychological Reports	64
Remedial Sessions	65
School Visits	87
Parent Interviews	62
Home Visits	10
Hospital Visits	2
Society Meetings	7
Lectures given	1
Courses attended	4

Social Worker:—

	Clinic Cases	School Welfare Cases
Home Visits	645	65
Clinic Interviews	652	16
School Enquiries	195	21
Other Consultations	749	70
	2241	172

Remedial Teacher:—

Psychological Tests	123
Remedial Sessions (Schools)	190

SPEECH THERAPY 1968

Mrs. M.A. Salsbury, Speech Therapist, submits the following observations:—

The Speech Therapy Service is still without a full-time Speech Therapist, but I commenced part-time employment in September. Since then much time has been spent in interviewing children and their parents who were under the supervision of Mrs. Avison. Many of these children are still in need of regular treatment. There has been a steady number of new referrals, but immediate treatment is not possible.

It is always worthwhile seeing children at an early age if they appear to have difficulty in acquiring language and speech, or present a non-fluency about which the parents are anxious. Practical advice can be given and the parents anxieties allayed; thus helping the child to achieve speech with the minimum of treatment.

It must be remembered that in dealing with a child's speech or language difficulties, one is not dealing purely with the mechanics of speech, but with the whole child in his environment. Thus the role that parents have to play in helping any child to acquire normal speech cannot be over-emphasised, and without their co-operation and support successful treatment is virtually impossible.

I have been most grateful for the co-operation received from the staff of the Health Department, and the Head Teachers of the schools concerned, in the task of trying to serve the whole borough in four sessions weekly.

The figures shown in the table below are for the period from September to December only:—

Total number of attendance	236
Number of patients receiving regular treatment during this period	21
Number of patients receiving treatment at intervals during this period	13
Number of patients discharged	29

Classification of Patients receiving treatment:

Dyslalia (defect of articulation)	17
Retarded speech or language development	12
Dyseneia	1
Stammer	2
Cleft Palate	2
Total	34

Classification of Patients Discharged:

Speech normal	11
Speech much improved	11
Left school	2
Left district	2
Unco-operative	1
Treatment contra-indicated	1
At parents request	1
Total	29

Classification of the Waiting List:

Patients interviewed and awaiting treatment	42
Previous Patients (of Mrs. Avison) yet to be interviewed	60
Total	102

MEDICAL EXAMINATION OF TEACHERS OR INTENDING TEACHERS.—Min. of Education Circ. 249 of 1952
Total Number Examined. 1968

Teachers		Intending Teachers	
Male	6	Male	28
Female	5	Female	83
Total	11	Total	111

School Meals Service

During the year 43 new staff were medically examined and X-rayed on entering the Service and 5 members of the staff were re-examined.

Minor Ailments Clinic

Minor Ailments Clinics are held at each of the school clinics as follows:—

Merton Road Clinic-Monday, Wednesday and Thursday mornings.
Water Street Clinic-Monday, Wednesday and Friday mornings.
Moreton Clinic-Monday to Friday mornings up to 10.30 a.m.
Hudson Road Clinic-Monday to Friday mornings up to 10.30 a.m.

A doctor is in attendance at Merton Road Clinic each Wednesday morning and at Water Street Clinic each Monday morning. A variety of minor ailments, such as infected ears, infected eyes, impetigo, cuts, burns and warts are treated at these clinics, whilst at the doctors' sessions, medical and psychological problems, as distinct from minor ailment, can be investigated and the appropriate advice or treatment given.

EXAMINATIONS OF CHILDREN FOR EMPLOYMENT, ENTERTAINMENT, HOLIDAYS ABROAD, ETC,

Employment	182
Entertainment	-
Holidays Abroad, etc.	-
	182

B.C.G. VACCINATION

No. of children offered (per parents) B.C.G. Vaccination	1,618
No. of children accepting (per parents) B.C.G. Vaccination	1,217
Percentage of Parents acepting vaccination	75.22%
No. of children Mantoux tested	1,212
No. of children found Mantoux positive	31
Percentage of children Mantoux positive ...	2.50%
No. of children found Mantoux negative ...	1,181
No. of children vaccinated with B.C.G. Vaccine	1,143

SUMMARY OF THE WORK CARRIED OUT BY THE SCHOOL HEALTH VISITORS DURING THE YEAR 1968

Health Surveys and Infestation with Vermin	
Health Surveys	115
No. of Clinic Sessions re Cleansing	25
No. of Examinations	19,616
No. of individual children found unclean	555
Home Visits	
Cleanliness	444
Medical Treatment	281
Hospital References	34
Miscellaneous	369
Ineffective visits, i.e. No. Access	278
Other	
Visits to Nursery School	20
Visits to Special Schools	24

ELLERAY PARK OPEN-AIR SCHOOL

During the year 21 children were admitted; the classification of their defects or diseases being as follows:-

Defective Hearing	1
Congenital Heart Disease	3
Hydrocephalus	2
Scoliosis	1
Delicate	3
Spastic Hemiplegia	2
Poliomyelitis	1
Muscular Dystrophy	2
Epilepsy	1
Asthma	1
Partially Sighted	1
Kidney Disease	1
Meningomyelocele	1
Cretinism	1
	21

During 1968 seven children were transferred to ordinary schools, three left the district, thirteen left on attaining 16 years of age and three were transferred to Claremount Day Special School.

PHYSICAL EDUCATION AND SCHOOL MEALS SERVICE

Observations of Mr. C.D. Clare, Organiser of Physical Education:—

The one development during the year of direct significance to this report has been the building of the new school for physically handicapped and delicate children in Elleray Park. The spacious hall, equipped with a variety of fixed gymnastic apparatus and, more particulary, the facilities for hydro-therapy which include a pool where the rudiments of swimming can be taught, provide conditions for physical education ideal in comparison with those in the former premises.

The Sports Hall at Oldershaw Grammar School, replacing a sub-standard gymnasium, is now under construction and similar facilities are planned for Wallasey High School. It is hoped that in due time adequate indoor accommodation of this nature will be provided at all Third-Tier Schools and that through joint planning and finance they will have enhanced facilities enabling full use to be made of them by all sections of the community. The completion of all-weather areas serving Wallasey High School and St. Thomas Becket School can also be reported. With the limited and low-lying land remaining in the Borough for development into playing fields, construction of such all-weather grounds would appear to be the major means possible to alleviate the current shortage of outdoor facilities.

The programme of school re-organisation to which the Authority is committed poses problems for Physical Education, where the high capital cost of additional facilities required may prove a temporary obstacle to progress. However, whilst immediate improvement in standards of work, particulary during the period of transition is not to be expected it is anticipated in the long term view that the facilities envisaged will prove of significant value not only in school work but in enabling recreational interests initiated in schools to be pursued during leisure time throughout active adult life.

During the year the customary inter-school events have been held and it may be noted that in Athletics, despite the washing out of our own event, pupils represented Wallasey at County and National events. Demonstrations

of canoeing were organised for teachers and pupils and development of this activity has been greatly helped by facilities provided at the Derby Pool. In all the many out-of-school activities which have taken place tribute should be paid to the voluntary efforts of teachers who have given so much of their enthusiasm and time in the interests of their pupils. Since publicity and display are foreign to many of the concepts of children's physical education the great mass of extra-school activity takes place out of public view. Its importance, however, is almost as great as that of the more formal work in school and it is hoped that all teachers engaged in it may be given full encouragement and support in its continuance.

Observations of Miss A.L. Collins, Organiser, School Meals Service.

The Meals Census taken on a day in September, 1968, showed that 10,105 children had taken a midday meal on that day, an increase of 235 over the number for the previous year.

Of these meals, 2,525 were provided free of charge to necessitous children.

During school holidays, 29,946 meals were served at 4 Centres in the Borough. This represents a comparatively small proportion of the number of children who are entitled to take advantage of the Service.

As a result of a decision by the Department of Education and Science, the supply of milk to children of secondary school age was discontinued as from September of this year.

During the Autumn Term, a total of 26 male and female Meals Assistants were appointed for supervisory duties to secondary schools throughout the Borough. Recruitment has been slow as it is difficult to find suitable persons to work for the limited number of hours of seven and a half per week.

In November the new Kitchen at Elleray Park School was opened. It is designed to produce 100 meals by means of a new type of eqipment which has been developed by a consortium of Local Authorities in the North West, especially for use in the School Meals Service. The dining area has been furnished with gaily coloured formica-topped tables, and family service has been introduced with success.

As in past years, improvements in equipment are continuing to be made in Kitchens, replacements being of modern design planned specifically for School Meals use.

Report of the Principal School Dental Officer:-

There is annually an ever increasing demand for orthodontic treatment and, in consequence, our statistical returns show a substantial increase in the number of appliances fitted. In this we were helped greatly by the visits of a consultant from the Hospital Board. Although these sessions were only advisory and amounted to just six in the year, 143 patients were examined, and many of them, by extending our work to more complex forms of malocclusion, treated at our clinics. Because the cost in time and work involved is high, orthodontic treatment is not a service available to all and sundry. Minor tooth irregularities are as natural as variations in other parts of the facial structure, but it is sometimes difficult to convince some parents that the production of a sterotyped row of teeth by sacrificing sound teeth and increasing the caries rate of the remainder, if the appliances are not kept clean, is not always in the child's best interest.

I am pleased to report that as a result of carefully selecting cases for treatment our figures do not show a discontinued case through complete lack of co-operation.

Dr. Grant's observation in last year's report on the improved state of childrens oral hygiene was encouraging. It is certainly true of the teenagers whose mouths are generally healthy and their teeth extensively conserved. In this respect television has helped in projecting visually the many attractions of our pop stars, one of which is usually a gleaming dentition. On the debit side the constant reiteration of the delights and rewards, both romantically and financially, associated with a box of chocolates, suggested by the various advertising media make our efforts in preventive dentistry seem rather puny. Unfortunately, clean teeth will continue to decay so long as the diet is composed or supplemented by a surfeit of fermentable carbohydrates, but the effects of dental caries, still the most widespread disease known to man, are hidden by dental treatment which now absorbs an ever increasing part of our National Health Service expenditure. Paradoxically, it would seem that the more easily it is to obtain dental treatment, the more complacent we become in taking advantage of such preventive measures as fluoridation.

Turning to the clinical aspect of our work, I regret to report that we have still only two one surgery units in Wallasey, excluding Leasowe and Moreton. One of these is so inadequate that the recovery room will not take a couch, there is no dark room for the developing of x-rays and the surgery is of such a size that more

modern equipment could not be included. Whilst the present economic position has not affected our service only, the development of a really viable unit remains in the future.

I should like to thank Dr. Fergusson for his valuable work on the preventive side of dentistry and to welcome the newly appointed school medical officers who are already showing their keen interest in referring dental patients. The health visitors are as vigilant as ever in promoting dental health, and I am grateful to them for adding this work to their other duties. Finally, I thank the teachers for their co-operation during our dental inspections, which this year covered over 11,000 pupils, some being twice inspected in the year.

MEDICAL INSPECTION, 1968

MAINTAINED PRIMARY AND SECONDARY SCHOOLS

PART I—MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

TABLE A.—PERIODIC MEDICAL INSPECTIONS

Number of pupils on register 17,055

Age Groups Inspected (By year of birth)	No. of Pupils Inspected	Physical Condition of Pupils Inspected			
		Satisfactory		Unsatisfactory	
		No.	% of Col.2	No.	% of Col.2
(1)	(2)	(3)	(4)	(5)	(6)
1964 and later	42	42	100.00	-	-
1963	519	519	100.00	-	-
1962	1,065	1,064	99.91	1	.09
1961	117	117	100.00	-	-
1960	30	30	100.00	-	-
1959	19	19	100.00	-	-
1958	12	12	100.00	-	-
1957	354	354	100.00	-	-
1956	962	962	100.00	-	-
1955	379	379	100.00	-	-
1954	291	291	100.00	-	-
1953 and earlier	804	804	100.00	-	-
TOTAL	4,594	4,593	99.98	1	.02

TABLE B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS
(excluding Dental Diseases and Infestation with Vermin)

Age Groups Inspected (By year of birth) (1)	For defective vision (excluding squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1964 and later	1	28	21
1963	29	172	115
1962	71	438	387
1961	10	73	70
1960	6	23	16
1959	4	16	11
1958	1	9	4
1957	50	103	119
1956	174	331	383
1955	59	118	129
1954	38	80	93
1953 and earlier	181	263	329
TOTAL	624	1,654	1,677

TABLE C. — OTHER INSPECTIONS

Number of Special Inspections	974
Number of Re-inspections	196
Total	1,170

TABLE D. — INFESTATION WITH VERMIN

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons	19,616
(b) Total number of individual pupils found to be infested	555
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944)	-
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944)	-

PART II — DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR

PART II TABLE A. — PERIODIC INSPECTIONS

Defect or Disease	PERIODIC INSPECTIONS							
	Entrants		Leavers		Others		Total	
(2)	(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
Skin	49	37	120	51	86	45	255	133
Eyes-(a) Vision	117	111	219	55	288	83	624	249
(b) Squint	51	19	13	4	30	9	94	32
(c) Other	10	8	7	9	17	17	34	34
Ears-(a) Hearing	78	33	7	16	20	19	105	68
(b) Otitis Media	20	41	6	6	7	15	33	62
(c) Other	23	14	14	19	15	17	52	50
Nose and Throat	107	210	17	107	35	193	159	510
Speech	41	25	3	4	5	11	49	40
Lymphatic Glands	3	79	-	18	-	76	3	173
Heart	6	11	3	15	2	21	11	47
Lungs	38	31	15	20	28	26	81	77
Developmental-								
(a) Hernia	7	5	-	2	5	1	12	8
(b) Other	36	51	25	49	79	61	140	161
Othopaedic-								
(a) Posture	8	13	3	34	17	31	28	78
(b) Feet	100	76	49	63	105	93	254	232
(c) Other	75	39	28	22	50	43	153	104
Nervous System-								
(a) Epilepsy	8	7	6	2	5	2	19	11
(b) Other	2	2	5	7	12	4	19	13
Psychological-								
(a) Development	12	23	2	6	24	31	38	60
(b) Stability	49	70	15	23	24	54	88	147
Abdomen	7	4	2	5	10	8	19	17
Other	4	5	3	2	1	2	8	9

PART II TABLE B. — SPECIAL INSPECTIONS

Defect or Disease	SPECIAL INSPECTIONS	
	Pupils requiring Treatment	Pupils requiring Observation
Skin	32 (334) *	-
Eyes-(a) Vision	27	1
(b) Squint	7	-
(c) Other	18	-
Ears-(a) Hearing	31	1
(b) Otitis Media	2	-
(c) Other	35	-
Nose and Throat	11	-
Speech	16	-
Lymphatic Glands	-	-
Heart	-	-
Lungs	8	-
Developmental-		
(a) Hernia	-	-
(b) Other	4	-
Orthopaedic-		
(a) Posture	8	-
(b) Feet	50	1
(c) Other	13	-
Nervous System-		
(a) Epilepsy	1	-
(b) Other	8	1
Psychological-		
(a) Development	4	-
(b) Stability	5	-
Abdomen	3	-
Other	110	-

* No. of pupils found to require treatment for Warts or Verrucae and the majority of these cases were treated with carbon dioxide snow.

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

PART III TABLE A.—EYE DISEASES AND DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	336
Errors of refraction (including squint)	1,687
Total	2,023
Number of pupils for whom spectacles were prescribed	[illegible]

TABLES B.— DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of cases known to have been dealt with
Received operative treatment—	
(a) for diseases of the ear	3
(b) for adenoids and chronic tonsillitis	158
(c) for other nose and throat conditions	48
Received other forms of treatment ...	165
Total	374
Hearing Tests - Undertaken by Audiometrician-	
New Cases	310
Re-tests	194
Cases referred to School M.O. ...	232
Cases referred to own doctor ...	17
Cases referred to consultants ...	8
Total	761
Total number of pupils in schools who are known to have been provided with hearing aids-	
(a) in 1968	5
(b) in previous years	14

TABLE C. —ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
(a) Pupils treated at clinics or out-patient departments	720
(b) Pupils treated at school for postrual defects	13
Total	733

TABLE D. — DISEASES OF THE SKIN
(excluding uncleanliness, for which see Table D of Part 1)

	Number of cases known to have been treated
Ringworm-(a) Scalp	-
(b) Body	1
Scabies	8
Impetigo	48
Other skin diseases	257
Total	314

TABLE E. — CHILD GUIDANCE TREATMENT

	Number of cases known to have been treated
Pupils treated at Child Guidance Clinics ...	178

TABLE F. — SPEECH THERAPY

	Number of cases known to have been treated
Received regular treatment	21
Received treatment at irregular intervals	13
Total pupils treated by Speech Therapist	34

TABLE G.— OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	2,196
(b) Pupils who received convalescent treatment under School Health Service arrangements	1
(c) Pupils who received B.C.G. vaccination	1,143
(d) Pupils who received Hospital In-patient treatment—	
Medical	248
Surgical	169
Orthopaedic	46
Total (a)—(d)	3,803

PART IV.— DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY

ATTENDANCES AND TREATMENT

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First Visits	1,292	1,327	278	2,897
Subsequent visits ...	1,342	2,297	468	4,107
Total visits	2,634	3,624	746	7,004
Additional courses of treatment commenced	234	310	44	588
Fillings in permanent teeth	1,351	3,416	826	5,593
Fillings in deciduous teeth	550	63	-	613
Permanent teeth filled	998	2,796	709	4,503
Deciduous teeth filled	493	56	-	549
Permanent teeth extracted	102	542	144	788
Deciduous teeth extracted	1,513	657	-	2,170
General anaesthetics	803	549	76	1,428
Emergencies	409	204	43	656

Number of Pupils x-rayed	169
Prophylaxis	1,029
Teeth otherwise conserved	159
Number of teeth root filled	13
Inlays	1
Crowns	6
Courses of treatment completed	2,792

ORTHODONTICS

Cases remaining from previous year ...	6
New cases commenced during year	52
Cases completed during year	16
Cases discontinued during year	-
No. of removable appliances fitted	53
No. of fixed appliances fitted	5
Pupils referred to Hospital Consultant ...	148

PROSTHETICS

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time)	-	-	-	-
Pupils supplied with other dentures (first time)	1	17	4	22
Number of dentures supplied	1	18	6	25

ANAESTHETICS

General Anaesthetics administered by Dental Officers 699

INSPECTIONS

(a) First inspection at school Number of Pupils ...	11,855
(b) First inspection at clinic Number of Pupils ...	1,271
Number of (a) + (b) found to require treatment	5,854
Number of (a) + (b) offered treatment	5,818
(c) Pupils re-inspected at school clinic	681
Number of (c) found to require treatment	273

SESSIONS

Sessions devoted to treatment	1,484
Sessions devoted to inspection	137
Sessions devoted to Dental Health Education ...	16

MINOR AILMENTS AND OTHER CLINICS

Monday	(a.m.)	School Clinic, Merton Road, Wallasey ...	Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey	Minor Ailments and S.M.O.'s Clinic
		Health Clinic, Hudson Road, Leasowe ...	Minor Ailments
	(p.m.)	Child Welfare Centre, Water Street, Wallasey	Immunisation (3rd Monday each month)
Tuesday	(a.m.)	School Clinic, Merton Road, Wallasey ...	Ophthalmic Clinic (Mr. E. Edwards) (by appointment only)
		Health Clinic, Hudson Road, Leasowe ...	Minor Ailments
		Child Welfare Centre Oakenholt Rd., Moreton	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey	-
	(p.m.)	-	-
Wednesday	(a.m.)	School Clinic, Merton Road, Wallasey ...	S.M.O.'s Clinic Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments
		Health Clinic, Hudson Road, Leasowe ...	Minor Ailments
		Child Welfare Centre, Water Street, Wallasey	Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey ...	Immunisation (1st Wednesday each month)

Thursday	(a.m.)	School Clinic, Merton Road, Wallasey ...	Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Minor Ailments
		Child Welfare Centre, Oakenholt Rd., Moreton	Ophthalmic Clinic (Mr. Edwards once per month by appointment only)
		Child Welfare Centre, Water Street, Wallasey	-
		Health Clinic, Hudson Road, Leasowe ...	Minor Ailments
	(p.m.)	-	-
Friday	(a.m.)	School Clinic, Merton Road, Wallasey ...	Ophthalmic Clinic (Mr. Edwards fortnightly by appointment only)
		Child Welfare Centre, Oakenholt Rd., Moreton	Ophthalmic Clinic (Mr. Edwards once per month by appointment only) Minor Ailments
		Child Welfare Centre, Water Street, Wallasey	Minor Ailments
		Health Clinic, Hudson Road, Leasowe ...	Ophthalmic Clinic (Mr. Edwards once per month by appointment only Minor Ailments
	(p.m.)	School Clinic, Merton Road, Wallasey ... Health Clinic, Hudson Road, Leasowe ...	S.M.O.'s Clinic (Fortnightly) Immunisation (3rd Friday each month)
		Child Welfare, Centre, Oakenholt Rd., Moreton	Immunisation (2nd & 4th Friday each month)

SPEECH THERAPY CLINICS

Tuesday	(a.m.) (p.m.)	School Clinic, Merton Road, Wallasey. School Clinic, Oakenholt Road, Moreton.
Thursday	(a.m.) (p.m.)	School Clinic, Merton Road, Wallasey. School Clinic, Water Street, Wallasey.

PHYSIOTHERAPY CLINICS

Monday	(a.m.) (p.m.)	School Clinic, Merton Road, Wallasey (U.V.L. and Individual Treatments) School Clinic, Merton Road, Wallasey. (Individual Treatments) Welfare Centre, Oakenholt Road, Moreton (U.V.L.
Tuesday	(a.m.) (p.m.)	Welfare Centre, Oakenholt Road, Moreton. (Remedial Exercises & Individual Treatments) Elleray Park Special School, Wallasey. (Individual Treatments) School Clinic, Merton Road, Wallasey. (Individual Treatments)
Wednesday	(a.m.) (p.m.)	Orthopaedic Specialist's Clinic, School Clinic, Merton Road, Wallasey. School Clinic, Merton Road, Wallasey. (Individual Treatments)
Thursday	(a.m.) (p.m.)	Welfare Centre, Oakenholt Road, Moreton. (U.V.L. and Individual Treatments) School Clinic, Merton Road, Wallasey. (Individual Treatments)
Friday	(a.m.) (p.m.)	School Clinic, Merton Road, Wallasey (U.V.L. and Individual Treatments) Elleray Park Special School, Wallasey. (Individual Treatments) Welfare Centre, Water Street, Wallasey. (Remedial Exercises) School Clinic, Merton Road, Wallasey. (Individual Treatments)

SCHOOL DENTAL CLINICS

nday	(a.m.)	Child Welfare Centre, Water Street, Wallasey. Child Welfare Centre, Oakenholt Road, Moreton. Child Welfare Centre, Hudson Road, Leasowe. School Clinic, Merton Road, Wallasey.
	(p.m.)	As Monday a.m.
esday	(a.m.)	Child Welfare Centre, Water Street, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Road, Moreton.
	(p.m.)	Child Welfare Centre, Water Street, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Road, Moreton. Child Welfare Centre, Hudson Road, Leasowe.
dnesday	(a.m.)	Child Welfare Centre, Water Street, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Road, Moreton. Child Welfare Centre, Hudson Road, Leasowe.
	(p.m.)	As Wednesday a.m.
ursday	(a.m.)	School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Road, Moreton. Child Welfare Centre, Hudson Road, Leasowe.
	(p.m.)	Child Welfare Centre, Water Street, Wallasey. School Clinic, Merton Road, Wallasey. Child Welfare Centre, Oakenholt Road, Moreton. Child Welfare Centre, Hudson Road, Leasowe.
iday	(a.m.)	As Thursday p.m.
	(p.m.)	As Thursday p.m.

CHILD GUIDANCE CLINIC

(Psychiatric Department)

Town Hall, Wallasey, Dr. G. Egan; M.D., CH.B., D.P.M.,
Tuesday afternoons and Thursday mornings.

HANDICAPPED PUPILS-YEAR 1968.

Year Ended 31st December, 1968	Blind	Partially Sighted	Deaf	Partially Deaf	Physically Handicapped	Delicate	Mal-adjusted	E.S.N.	Epileptic	Speech Defects	Total
(1) Newly assessed as needing special Educational Treatment at Special Schools or Boarding Homes	-	4	1	1	7	2	3	32	-	-	50
(2) Newly placed in Special Schools or Boarding Homes	-	1	-	1	7	2	1	24	-	-	36
(3) As at 31st January, 1969 Pupils on Registers of Maintained Special Schools:-											
(a) Day Pupils	-	6	4	5	51	23	-	112	8	2	211
(b) Boarding Pupils	-	-	1	-	-	-	-	2	-	-	3
(4) Pupils on Registers of Non-Maintained Special Schools:-											
(a) Day Pupils	-	-	-	-	-	-	-	-	-	-	-
(b) Boarding Pupils	7	-	3	1	1	-	1	2	1	-	16
(5) On the Registers of Independent Schools under arrangements made by the Authority	-	-	-	-	-	-	6	3	-	-	9
Total (3-5)	7	6	8	6	52	23	7	117	9	2	239
(6) Pupils requiring places in Special Schools:-											
(a) Day	-	-	1	-	-	-	-	8	-	-	9
(b) Boarding	-	3	-	-	-	-	2	1	-	-	6
(7) Pupils being educated under the provisions of Sec. 56 of the Education Act, 1944:-											
(a) In Hospitals	-	-	-	-	1	-	-	-	-	-	1
(b) At Home	-	-	-	-	2	-	1	-	-	-	3

CHILDREN FOUND UNSUITABLE FOR SCHOOL-YEAR ENDING 31st DECEMBER, 1968.

Informal Ascertainment	6
Under Sec. 57(4) of the Education Act, 1944	-
Number of decisions cancelled under Sec. 57A(2) of the Education Act, 1944 ..	-